

## 1 / 194

FF1AN060.PDF

**DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS****2 / 194**

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

**MIKE GRAVEL FOR PRESIDENT 2008**

Report Covering the Period

From: 10/01/2007

To: 12/31/2007

<b>I. RECEIPTS</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	141601.45	447378.97
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	501.60
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		141601.45	447880.57
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	73515.73
(b) Other Loans	.....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	73515.73
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	0.00	0.00
(b) Fundraising	.....	0.00	0.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		0.00	0.00
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	0.00	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	141601.45	521396.30
<b>II. DISBURSEMENTS</b>			
23. OPERATING EXPENDITURES	.....	151861.04	498229.34
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	10000.00	25900.00
(b) Other Repayments	.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	10000.00	25900.00
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	0.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	0.00	0.00
29. OTHER DISBURSEMENTS	.....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	161861.04	524129.34
<b>III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)</b>			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

**ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE** 3 / 194  
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)  
 (PAGE 3, FEC FORM 3P)

1. NAME OF COMMITTEE (in full)

**MIKE GRAVEL FOR PRESIDENT 2008**

ADDRESS (number and street)

1600 N OAK ST #1412

CITY, STATE, and ZIP CODE

ARLINGTON

VA

22209

2. IDENTIFICATION NUMBER

C00423202

**ALLOCATION BY STATE**

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	10454.40
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			<b>TOTALS</b>	<b>0.00</b>	<b>10454.40</b>

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 4 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Gole Abhijeet

Mailing Address

1462 Rose Garden Ln null null

City

Cupertino

State

CA

Zip Code

95014

FEC ID number of contributing  
federal political committee.

Name of Employer  
Marvell Semiconductor

Occupation

Software Director

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

287.75

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16691

**B.**

Full Name (Last, First, Middle Initial)

movahedi afsaneh

Mailing Address

36 Blue Heron Way

City

Concord

State

MA

Zip Code

01742

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation

mother/home

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15320

**C.**

Full Name (Last, First, Middle Initial)

WILSON ALETTA

Mailing Address

P.O. BOX 1088

City

MESILLA PARK

State

NM

Zip Code

88047

FEC ID number of contributing  
federal political committee.

Name of Employer  
NONE

Occupation

RETIRED

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.14131

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Mayhut Alysia</p> <p>Mailing Address 414 Old Dam Road</p> <p>City State Zip Code Selma NC 27576</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer NA</p> <p>Occupation Na</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 215.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 1 / 0 2 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15574</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Mayhut Alysia</p> <p>Mailing Address 414 Old Dam Road</p> <p>City State Zip Code Selma NC 27576</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer NA</p> <p>Occupation Na</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 265.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 1 / 1 0 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15782</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mayhut Alysia</p> <p>Mailing Address 414 Old Dam Road</p> <p>City State Zip Code Selma NC 27576</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer NA</p> <p>Occupation Na</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 290.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 1 / 1 4 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15947</p>

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 194

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Mayhut Alysia

Mailing Address

414 Old Dam Road

City

Selma

State

NC

Zip Code

27576

FEC ID number of contributing  
federal political committee.

Name of Employer  
NA

Occupation  
Na

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 6 / 2 0 0 7

Amount of Each Receipt this Period

15.00

CONTRIBUTION

Transaction ID: SA17A.16039

**B.**

Full Name (Last, First, Middle Initial)

Mayhut Alysia

Mailing Address

414 Old Dam Road

City

Selma

State

NC

Zip Code

27576

FEC ID number of contributing  
federal political committee.

Name of Employer  
NA

Occupation  
Na

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 0 1 / 2 0 0 7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.16305

**C.**

Full Name (Last, First, Middle Initial)

Mayhut Alysia

Mailing Address

414 Old Dam Road

City

Selma

State

NC

Zip Code

27576

FEC ID number of contributing  
federal political committee.

Name of Employer  
NA

Occupation  
Na

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16457

**SUBTOTAL** of Receipts This Page (optional) .....

140.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Mayhut Alysia

Mailing Address

414 Old Dam Road

City

Selma

State

NC

Zip Code

27576

FEC ID number of contributing  
federal political committee.

Name of Employer  
NA

Occupation

Na

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 5 / 2 0 0 7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.16610

**B.**

Full Name (Last, First, Middle Initial)

Mayhut Alysia

Mailing Address

414 Old Dam Road

City

Selma

State

NC

Zip Code

27576

FEC ID number of contributing  
federal political committee.

Name of Employer  
NA

Occupation

Na

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16641

**C.**

Full Name (Last, First, Middle Initial)

Yadav Anant

Mailing Address

1423 S. Campus Pkwy

City

Chicago

State

IL

Zip Code

60608

FEC ID number of contributing  
federal political committee.

Name of Employer  
St Margaret Mercy Healthc-  
are Centers

Occupation

Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14782

**SUBTOTAL** of Receipts This Page (optional) .....

325.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b> Full Name (Last, First, Middle Initial) Yadav Anant</p> <p>Mailing Address 1423 S. Campus Pkwy</p> <p>City State Zip Code Chicago IL 60608</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer St Margaret Mercy Healthc-are Centers</p> <p>Occupation Physician</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>Amount of Each Receipt this Period 36.15</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14857</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 0 / 2 0 0 7</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bardwell Andy</p> <p>Mailing Address 4801 W. Yale Ave.</p> <p>City State Zip Code Denver CO 80219</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Self</p> <p>Occupation Consultant</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14475</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Donaldson Ann</p> <p>Mailing Address 4421 Eastwood Rd.</p> <p>City State Zip Code Minnetonka MN 55345</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer None</p> <p>Occupation Unemployed</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.13581</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7</p>

**SUBTOTAL** of Receipts This Page (optional) .....

1286.15

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

BECK ANNA

Mailing Address

26358 CARMEL RANCHO LANE STE 2

City

CARMEL

State

CA

Zip Code

93923

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 0 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.14330

**B.**

Full Name (Last, First, Middle Initial)

Grambihler Anton

Mailing Address

2008 Davison Ave

City

Richland

State

WA

Zip Code

99354

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13556

**C.**

Full Name (Last, First, Middle Initial)

Grambihler Anton

Mailing Address

2008 Davison Ave

City

Richland

State

WA

Zip Code

99354

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13653

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b>	Full Name (Last, First, Middle Initial) Wijetunga Aquinas		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 7	
	Mailing Address 665, St. Mark's Ave., '4D'		Amount of Each Receipt this Period 50.00	
	City Brooklyn	State NY		
	FEC ID number of contributing federal political committee.		CONTRIBUTION	
	Name of Employer Retired	Occupation Retired		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 625.00			
			Transaction ID: SA17A.14358	
<b>B.</b>	Full Name (Last, First, Middle Initial) Wijetunga Aquinas		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7	
	Mailing Address 665, St. Mark's Ave., '4D'		Amount of Each Receipt this Period 50.00	
	City Brooklyn	State NY		
	FEC ID number of contributing federal political committee.		CONTRIBUTION	
	Name of Employer Retired	Occupation Retired		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 675.00			
			Transaction ID: SA17A.14838	
<b>C.</b>	Full Name (Last, First, Middle Initial) Wijetunga Aquinas		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 7	
	Mailing Address 665, St. Mark's Ave., '4D'		Amount of Each Receipt this Period 50.00	
	City Brooklyn	State NY		
	FEC ID number of contributing federal political committee.		CONTRIBUTION	
	Name of Employer Retired	Occupation Retired		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 725.00			
			Transaction ID: SA17A.13654	

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15003

**B.**

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13717

**C.**

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15539

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13839

B.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 0 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16090

C.

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1035.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Transaction ID: SA17A.16298

**SUBTOTAL** of Receipts This Page (optional) .....

160.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Wijetunga Aquinas</p> <p>Mailing Address 665, St. Mark's Ave., '4D'</p> <p>City State Zip Code Brooklyn NY 11216</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1135.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16396</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Wijetunga Aquinas</p> <p>Mailing Address 665, St. Mark's Ave., '4D'</p> <p>City State Zip Code Brooklyn NY 11216</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1200.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 2 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 65.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.13989</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Wijetunga Aquinas</p> <p>Mailing Address 665, St. Mark's Ave., '4D'</p> <p>City State Zip Code Brooklyn NY 11216</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16659</p>

**SUBTOTAL** of Receipts This Page (optional) .....

265.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Wijetunga Aquinas

Mailing Address

665, St. Mark's Ave., '4D'

City

Brooklyn

State

NY

Zip Code

11216

FEC ID number of contributing  
federal political committee.

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16827

**B.**

Full Name (Last, First, Middle Initial)

AUBURN QUAD, INC.

Mailing Address

P.O. BOX 390728

City

CAMBRIDGE

State

MA

Zip Code

02139

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

898.02

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Amount of Each Receipt this Period

898.02

DONATIOS DEPOSITED

Transaction ID: SA17A.18195

**C.**

Full Name (Last, First, Middle Initial)

Sher Austin

Mailing Address

660 Washington St. - Apt. 4i

City

Boston

State

MA

Zip Code

02111

FEC ID number of contributing  
federal political committee.

Name of Employer  
n/a

Occupation  
n/a

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.16347

**SUBTOTAL** of Receipts This Page (optional) .....

1498.02

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

AUTHORIZENET CORP

Mailing Address

915 SOUTH 500 EAST

SUITE 200

City

AMERICAN FORK

State

UT

Zip Code

84003

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

 7411.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	0	7

Amount of Each Receipt this Period

 7411.30

DONATION ITEMS DEPOSITED

Transaction ID: SA17A.18196

**B.**

Full Name (Last, First, Middle Initial)

Dale-Bannister Bonnie

Mailing Address

P.O. Box 3

City

San Clemente

State

CA

Zip Code

92674

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
none

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

 215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	3		2	0	0	7

Amount of Each Receipt this Period

 25.00

CONTRIBUTION

Transaction ID: SA17A.16571

**C.**

Full Name (Last, First, Middle Initial)

Dale-Bannister Bonnie

Mailing Address

P.O. Box 3

City

San Clemente

State

CA

Zip Code

92674

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
none

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

 230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	7

Amount of Each Receipt this Period

 15.00

CONTRIBUTION

Transaction ID: SA17A.16594

**SUBTOTAL** of Receipts This Page (optional) .....

7451.30

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Dale-Bannister Bonnie

Mailing Address

P.O. Box 3

City

San Clemente

State

CA

Zip Code

92674

FEC ID number of contributing  
federal political committee.Name of Employer  
noneOccupation  
none

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	7

Amount of Each Receipt this Period

15.00

CONTRIBUTION

Transaction ID: SA17A.16702

B.

Full Name (Last, First, Middle Initial)

Dale-Bannister Bonnie

Mailing Address

P.O. Box 3

City

San Clemente

State

CA

Zip Code

92674

FEC ID number of contributing  
federal political committee.Name of Employer  
noneOccupation  
none

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	0		2	0	0	7

Amount of Each Receipt this Period

15.00

CONTRIBUTION

Transaction ID: SA17A.16737

C.

Full Name (Last, First, Middle Initial)

Dale-Bannister Bonnie

Mailing Address

P.O. Box 3

City

San Clemente

State

CA

Zip Code

92674

FEC ID number of contributing  
federal political committee.Name of Employer  
noneOccupation  
none

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	0	7

Amount of Each Receipt this Period

10.00

CONTRIBUTION

Transaction ID: SA17A.16772

SUBTOTAL of Receipts This Page (optional) .....

40.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Luther Brenda</p> <p>Mailing Address PO Box 1913</p> <p>City State Zip Code El Granada CA 94018</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer self Occupation Transformational Coach</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>1000.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 1 / 0 9 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  1000.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15779</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Thomerson Brenda</p> <p>Mailing Address 205 Sabeta Ave PO Box 445</p> <p>City State Zip Code Poncha Springs CO 81242</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Hair's to You Occupation Cosmetologist</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>250.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 2 / 1 8 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  250.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14028</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Borncamp Brian</p> <p>Mailing Address 301 Highgate Ave</p> <p>City State Zip Code Buffalo NY 14215</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer BNAC Occupation IT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>309.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 1 / 1 3 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  109.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16861</p>

**SUBTOTAL** of Receipts This Page (optional) .....

1359.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Ladd Brian</p> <p>Mailing Address 337 Chris Common #108</p> <p>City State Zip Code Livermore CA 94550</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Pleasanton Unified School District</p> <p>Occupation Teacher</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 208.76</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14628</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Coary Bruce</p> <p>Mailing Address 1146 Julie Lane</p> <p>City State Zip Code Crete IL 60417</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Palos Community Hospital</p> <p>Occupation IT Support</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 375.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14730</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Coary Bruce</p> <p>Mailing Address 1146 Julie Lane</p> <p>City State Zip Code Crete IL 60417</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Palos Community Hospital</p> <p>Occupation IT Support</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 425.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15646</p>

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Coary Bruce

Mailing Address

1146 Julie Lane

City

Crete

State

IL

Zip Code

60417

FEC ID number of contributing  
federal political committee.

Name of Employer  
Palos Community Hospital

Occupation  
IT Support

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15724

**B.**

Full Name (Last, First, Middle Initial)

Coary Bruce

Mailing Address

1146 Julie Lane

City

Crete

State

IL

Zip Code

60417

FEC ID number of contributing  
federal political committee.

Name of Employer  
Palos Community Hospital

Occupation  
IT Support

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16497

**C.**

Full Name (Last, First, Middle Initial)

LAIRD CARLTON

Mailing Address

4703 OTTERBEIN CT

City

GODFREY

State

IL

Zip Code

62035

FEC ID number of contributing  
federal political committee.

Name of Employer  
retired

Occupation  
retired city manager

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15192

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

LAIRD CARLTON

Mailing Address

4703 OTTERBEIN CT

City

GODFREY

State

IL

Zip Code

62035

FEC ID number of contributing  
federal political committee.

Name of Employer  
retired

Occupation

retired city manager

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15965

**B.**

Full Name (Last, First, Middle Initial)

LAIRD CARLTON

Mailing Address

4703 OTTERBEIN CT

City

GODFREY

State

IL

Zip Code

62035

FEC ID number of contributing  
federal political committee.

Name of Employer  
retired

Occupation

retired city manager

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16366

**C.**

Full Name (Last, First, Middle Initial)

Mullen Carol

Mailing Address

618 Tennyson Avenue

City

Palo Alto

State

CA

Zip Code

94301

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation

investors

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16044

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Mullen Carol

Mailing Address

618 Tennyson Avenue

City

Palo Alto

State

CA

Zip Code

94301

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
investors

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16804

**B.**

Full Name (Last, First, Middle Initial)

Sikorra Chad

Mailing Address

1600 Swartz Dr

Apt 23

City

Waukesha

State

WI

Zip Code

53188

FEC ID number of contributing  
federal political committee.

Name of Employer  
Goodwill Industries of So-  
utheastern WI

Occupation  
PC Support Specialist

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16453

**C.**

Full Name (Last, First, Middle Initial)

Sikorra Chad

Mailing Address

1600 Swartz Dr

Apt 23

City

Waukesha

State

WI

Zip Code

53188

FEC ID number of contributing  
federal political committee.

Name of Employer  
Goodwill Industries of So-  
utheastern WI

Occupation  
PC Support Specialist

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 5 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16760

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Kinsey Charles

Mailing Address

3105 Nantucket Ct.

City

Pearland

State

TX

Zip Code

77584

FEC ID number of contributing  
federal political committee.

Name of Employer  
self

Occupation  
lawyer

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
11 / 01 / 2007

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15519

**B.**

Full Name (Last, First, Middle Initial)

rizzo charles

Mailing Address

1240 n homan ave.

City

chicago

State

IL

Zip Code

60651

FEC ID number of contributing  
federal political committee.

Name of Employer  
skyline design

Occupation  
president

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
10 / 02 / 2007

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.14407

**C.**

Full Name (Last, First, Middle Initial)

Thompson Charles

Mailing Address

805 Connors Drive

City

Newport News

State

VA

Zip Code

23608

FEC ID number of contributing  
federal political committee.

Name of Employer  
Management Consulting

Occupation  
Manager

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
12 / 18 / 2007

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16721

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Herrera Christian

Mailing Address

576 W. 21st Street

City

San Pedro

State

CA

Zip Code

90731

FEC ID number of contributing  
federal political committee.

Name of Employer  
Los Angeles Unified School  
District

Occupation

Teacher

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

233.76

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16456

**B.**

Full Name (Last, First, Middle Initial)

Benacci Christina

Mailing Address

2202 Gunter Bay

City

San Antonio

State

TX

Zip Code

78245

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self

Occupation

Lawyer

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.13678

**C.**

Full Name (Last, First, Middle Initial)

Benacci Christina

Mailing Address

2202 Gunter Bay

City

San Antonio

State

TX

Zip Code

78245

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self

Occupation

Lawyer

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.13741

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Benacci Christina

Mailing Address

2202 Gunter Bay

City

San Antonio

State

TX

Zip Code

78245

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self

Occupation  
Lawyer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.13848

**B.**

Full Name (Last, First, Middle Initial)

Benacci Christina

Mailing Address

2202 Gunter Bay

City

San Antonio

State

TX

Zip Code

78245

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self

Occupation  
Lawyer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1008.44

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Amount of Each Receipt this Period

158.44

CONTRIBUTION

Transaction ID: SA17A.13849

**C.**

Full Name (Last, First, Middle Initial)

Benacci Christina

Mailing Address

2202 Gunter Bay

City

San Antonio

State

TX

Zip Code

78245

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self

Occupation  
Lawyer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1058.44

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13930

**SUBTOTAL** of Receipts This Page (optional) .....

308.44

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Benacci Christina</p> <p>Mailing Address 2202 Gunter Bay</p> <p>City State Zip Code San Antonio TX 78245</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Self</p> <p>Occupation Lawyer</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1108.44</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14010</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) MORRIL CHRISTOPHER</p> <p>Mailing Address 862 SIR FRANIS DRAKE BLVD #268</p> <p>City State Zip Code SAN ANSELMO CA 94960</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer NONE</p> <p>Occupation NONE</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 2300.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14295</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Ayuen Clement</p> <p>Mailing Address 3010 W. 4th Street</p> <p>City State Zip Code Los Angeles CA 90020</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer BNY Mellon</p> <p>Occupation Client Technology Consultant</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16274</p>

**SUBTOTAL** of Receipts This Page (optional) .....

2450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

DeGroff Dale

Mailing Address

841 Harrison Street

City

West Hempstead

State

NY

Zip Code

11552

FEC ID number of contributing  
federal political committee.

Name of Employer  
self

Occupation

Hospitality consultant

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14399

**B.**

Full Name (Last, First, Middle Initial)

Molnar Daniel

Mailing Address

27705 NE 1 st St

City

Redmond

State

WA

Zip Code

98053

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation

None

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16679

**C.**

Full Name (Last, First, Middle Initial)

Shea, O.D. Daniel

Mailing Address

3515 Bayview Ct.

City

Wichita

State

KS

Zip Code

67204

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation

Optometrist

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.14648

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 194  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Bryan David

Mailing Address

5939 e 32nd st

City

tucson

State

AZ

Zip Code

85711

FEC ID number of contributing  
federal political committee.

Name of Employer  
retired

Occupation  
retired

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.75

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13868

**B.**

Full Name (Last, First, Middle Initial)

Bryan David

Mailing Address

5939 e 32nd st

City

tucson

State

AZ

Zip Code

85711

FEC ID number of contributing  
federal political committee.

Name of Employer  
retired

Occupation  
retired

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

252.75

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 1 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13986

**C.**

Full Name (Last, First, Middle Initial)

Chard David

Mailing Address

8005 NE HUNT CLUB LN

City

Hansville

State

WA

Zip Code

98340

FEC ID number of contributing  
federal political committee.

Name of Employer  
CCG

Occupation  
Consultant

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.13767

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Hutchins David	Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	4		2	0	0	7												
Mailing Address 6526 SE 39th Ave.																					
City State Zip Code portland OR 97202																					
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>	50.00																			
50.00																					
Name of Employer self/Employed Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation leathercrafter CONTRIBUTION																				
Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">410.00</td> </tr> </table>	410.00										Transaction ID: SA17A.15167										
410.00																					
<b>B.</b> Full Name (Last, First, Middle Initial) Jenkins David	Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	1		2	0	0	7												
Mailing Address 4 Angevine Rd																					
City State Zip Code Warren CT 06754																					
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Name of Employer first new york securities INC	Occupation programmer CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
<b>C.</b> Full Name (Last, First, Middle Initial) king david	Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	9		2	0	0	7												
Mailing Address 5121 se 30th ave. #130 5121 se 30t																					
City State Zip Code portland OR 97202	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">209.40</td> </tr> </table>	209.40																			
209.40																					
Name of Employer none	Occupation retired CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">209.40</td> </tr> </table>	209.40																			
209.40																					
<b>SUBTOTAL</b> of Receipts This Page (optional) .....	Transaction ID: SA17A.14786 <table border="1"> <tr> <td colspan="10">509.40</td> </tr> </table>	509.40																			
509.40																					
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Mak David

Mailing Address

418 West 23rd Street

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing  
federal political committee.

Name of Employer  
BridgePort Networks

Occupation

Software Engineer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13747

**B.**

Full Name (Last, First, Middle Initial)

Mak David

Mailing Address

418 West 23rd Street

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing  
federal political committee.

Name of Employer  
BridgePort Networks

Occupation

Software Engineer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.15725

**C.**

Full Name (Last, First, Middle Initial)

Mak David

Mailing Address

418 West 23rd Street

City

Chicago

State

IL

Zip Code

60616

FEC ID number of contributing  
federal political committee.

Name of Employer  
BridgePort Networks

Occupation

Software Engineer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16400

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Mak David Mailing Address 418 West 23rd Street City State Zip Code Chicago IL 60616 FEC ID number of contributing federal political committee.	Date of Receipt	<input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17a <input type="checkbox"/> 17b <input type="checkbox"/> 17c <input type="checkbox"/> 17d <input type="checkbox"/> 18
	M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 0 7	
	Amount of Each Receipt this Period	50.00
	CONTRIBUTION	
	Transaction ID: SA17A.16697	
<b>B.</b> Full Name (Last, First, Middle Initial) Oyog David Mailing Address 2437 W Monterey Ave City State Zip Code Stockton CA 95204 FEC ID number of contributing federal political committee.	Date of Receipt	<input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17a <input type="checkbox"/> 17b <input type="checkbox"/> 17c <input type="checkbox"/> 17d <input type="checkbox"/> 18
	M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 7	
	Amount of Each Receipt this Period	100.00
	CONTRIBUTION	
	Transaction ID: SA17A.13691	
<b>C.</b> Full Name (Last, First, Middle Initial) Oyog David Mailing Address 2437 W Monterey Ave City State Zip Code Stockton CA 95204 FEC ID number of contributing federal political committee.	Date of Receipt	<input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17a <input type="checkbox"/> 17b <input type="checkbox"/> 17c <input type="checkbox"/> 17d <input type="checkbox"/> 18
	M M / D D / Y Y Y Y Y 1 2 / 1 2 / 2 0 0 7	
	Amount of Each Receipt this Period	100.00
	CONTRIBUTION	
	Transaction ID: SA17A.13990	

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Oyog David</p> <p>Mailing Address 2437 W Monterey Ave</p> <p>City State Zip Code Stockton CA 95204</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer AT&amp;T</p> <p>Occupation operator</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>500.00</p>	<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 0 7</p> <p>Amount of Each Receipt this Period</p> <p>100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14011</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Shapiro Desmond</p> <p>Mailing Address 2572 Grace Drive</p> <p>City State Zip Code Santa Rosa CA 95404</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer self</p> <p>Occupation physician</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>250.00</p>	<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7</p> <p>Amount of Each Receipt this Period</p> <p>250.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16013</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) McCullough Devon</p> <p>Mailing Address 7015 Churchill Road</p> <p>City State Zip Code McLean VA 22101</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Network Guild</p> <p>Occupation computer hacker</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>324.09</p>	<p>Date of Receipt</p> <p>M M / D D / Y Y Y Y Y 1 1 / 2 3 / 2 0 0 7</p> <p>Amount of Each Receipt this Period</p> <p>320.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16112</p>

**SUBTOTAL** of Receipts This Page (optional) .....

670.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Shuntich Dianne

Mailing Address

109 Eastern Hills Drive

City

Richmond

State

KY

Zip Code

40475

FEC ID number of contributing  
federal political committee.

Name of Employer  
retired

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13668

**B.**

Full Name (Last, First, Middle Initial)

Adams Donna

Mailing Address

2454B Westcliffe Ln.

City

Walnut Creek

State

CA

Zip Code

94597

FEC ID number of contributing  
federal political committee.

Name of Employer  
Caregiver/Goldsmith

Occupation  
Self

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

449.11

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 0 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13527

**C.**

Full Name (Last, First, Middle Initial)

Jones Duke

Mailing Address

2328 Channing Way

City

Berkeley

State

CA

Zip Code

94704

FEC ID number of contributing  
federal political committee.

Name of Employer  
Ecast, Inc.

Occupation  
Web Developer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

499.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

Amount of Each Receipt this Period

72.00

CONTRIBUTION

Transaction ID: SA17A.13563

**SUBTOTAL** of Receipts This Page (optional) .....

572.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Jones Duke</p> <p>Mailing Address 2328 Channing Way</p> <p>City State Zip Code Berkeley CA 94704</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Ecast, Inc.</p> <p>Occupation Web Developer</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>549.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 5 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15613</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Jones Duke</p> <p>Mailing Address 2328 Channing Way</p> <p>City State Zip Code Berkeley CA 94704</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Ecast, Inc.</p> <p>Occupation Web Developer</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>599.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16394</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Skriloff Dylan</p> <p>Mailing Address 13 Heights Road</p> <p>City State Zip Code Stony Point NY 10980</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Southern Dutchess News</p> <p>Occupation Journalist</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>235.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 0 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 125.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15785</p>

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Skriloff Dylan

Mailing Address

13 Heights Road

City

Stony Point

State

NY

Zip Code

10980

FEC ID number of contributing  
federal political committee.

Name of Employer  
Southern Dutchess News

Occupation  
Journalist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

10.00

CONTRIBUTION

Transaction ID: SA17A.16287

B.

Full Name (Last, First, Middle Initial)

Skriloff Dylan

Mailing Address

13 Heights Road

City

Stony Point

State

NY

Zip Code

10980

FEC ID number of contributing  
federal political committee.

Name of Employer  
Southern Dutchess News

Occupation  
Journalist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16673

C.

Full Name (Last, First, Middle Initial)

McJunkin E. A.

Mailing Address

541 Rock Forge Loop

City

Angels Camp

State

CA

Zip Code

95222

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self

Occupation  
Engineer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15425

**SUBTOTAL** of Receipts This Page (optional) .....

310.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Simmonds Elizabeth

Mailing Address

81 Daisy Springs Ct

City

Las Vegas

State

NV

Zip Code

89148

FEC ID number of contributing  
federal political committee.

Name of Employer  
Vin Sauvage

Occupation  
Wine Sales

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14567

**B.**

Full Name (Last, First, Middle Initial)

KORNSAND ELLIOT

Mailing Address

P.O. BOX 16640

City

SAN JUAN

State

PR

Zip Code

00908

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 0 / 2 0 0 7

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Transaction ID: SA17A.14333

**C.**

Full Name (Last, First, Middle Initial)

Jacobson Elliott

Mailing Address

1001 3rd Street, SW

City

Washington

State

DC

Zip Code

20024

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self-Employed

Occupation  
Writer/Political Cons.

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14696

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

FRANKLIN ESTHER

Mailing Address

3980 MC KINLEY BLVD

City

SACRAMENTO

State

CA

Zip Code

95819

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

232.75

Date of Receipt

MM / DD / YYYY  
11 / 18 / 2007

Amount of Each Receipt this Period

57.75

CONTRIBUTION

Transaction ID: SA17A.14968

**B.**

Full Name (Last, First, Middle Initial)

FRANKLIN ESTHER

Mailing Address

3980 MC KINLEY BLVD

City

SACRAMENTO

State

CA

Zip Code

95819

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

282.75

Date of Receipt

MM / DD / YYYY  
12 / 01 / 2007

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16313

**C.**

Full Name (Last, First, Middle Initial)

jaleski eugene

Mailing Address

671 cedar street

City

longboat key

State

FL

Zip Code

34228

FEC ID number of contributing  
federal political committee.

Name of Employer  
retired

Occupation

computer systems designer

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
12 / 03 / 2007

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16335

**SUBTOTAL** of Receipts This Page (optional) .....

207.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Clark Faisal	Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	5		2	0	0	7												
Mailing Address 615 Cole St. Apt#17																					
City State Zip Code San Francisco CA 94117																					
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Name of Employer Occupation Hands-On Mobile	CONTRIBUTION																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Transaction ID: SA17A.16869																					
<b>B.</b> Full Name (Last, First, Middle Initial) Long Frank	Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	7		2	0	0	7												
Mailing Address POPB 398																					
City State Zip Code El Granada CA 94018																					
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Name of Employer Occupation Self employed Health Food Store Owner	CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Transaction ID: SA17A.15689																					
<b>C.</b> Full Name (Last, First, Middle Initial) VANNAERSEN FREDERIK	Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	0		2	0	0	7												
Mailing Address 803 HIDDEN CREEK CT																					
City State Zip Code CEDAR HILL TX 75104																					
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Name of Employer Occupation none CPA	CONTRIBUTION																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Transaction ID: SA17A.14802																					

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) fundaro gaetano</p> <p>Mailing Address 40 brooline ave</p> <p>City State Zip Code middletown NY 10940</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer NYPD</p> <p>Occupation police officer</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>250.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 0 / 0 4 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  250.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14646</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) fundaro gaetano</p> <p>Mailing Address 40 brooline ave</p> <p>City State Zip Code middletown NY 10940</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer NYPD</p> <p>Occupation police officer</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>350.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 1 / 2 8 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16201</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Hansen Gary</p> <p>Mailing Address P.O.Box 868</p> <p>City State Zip Code Tiburon CA 94920</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Hansen and Associates</p> <p>Occupation Architect</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>292.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 2 / 0 6 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  292.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16455</p>

**SUBTOTAL** of Receipts This Page (optional) .....

642.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Melling George Mailing Address 3081 Whitewater Dr City State Zip Code Holladay UT 84121 FEC ID number of contributing federal political committee.			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7 Amount of Each Receipt this Period 250.00 CONTRIBUTION Transaction ID: SA17A.14433
<b>B.</b> Full Name (Last, First, Middle Initial) Shimabuku George Mailing Address 91825 Makaonaona St. City State Zip Code Ewa Beach HI 96706 FEC ID number of contributing federal political committee.			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 8 / 2 0 0 7 Amount of Each Receipt this Period 50.00 CONTRIBUTION Transaction ID: SA17A.15735
<b>C.</b> Full Name (Last, First, Middle Initial) Shimabuku George Mailing Address 91825 Makaonaona St. City State Zip Code Ewa Beach HI 96706 FEC ID number of contributing federal political committee.			Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 9 / 2 0 0 7 Amount of Each Receipt this Period 50.00 CONTRIBUTION Transaction ID: SA17A.16722

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b> Full Name (Last, First, Middle Initial) WRIGHT GEORGE</p> <p>Mailing Address 3622 STONEGLEN S</p> <p>City State Zip Code RICHMOND CA 94806</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Social Security Occupation Disability Examiner</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>250.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 0 / 0 2 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  250.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14511</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) COSENZA GLENDA</p> <p>Mailing Address 126 ILEHAMWOOD DRIVE</p> <p>City State Zip Code DEKALB IL 60115</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Northern Illinois Univ Occupation Professor of Music Education</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>245.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 1 / 0 1 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  45.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15545</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) COSENZA GLENDA</p> <p>Mailing Address 126 ILEHAMWOOD DRIVE</p> <p>City State Zip Code DEKALB IL 60115</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Northern Illinois Univ Occupation Professor of Music Education</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>495.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 1 / 0 7 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  250.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15676</p>

**SUBTOTAL** of Receipts This Page (optional) .....

545.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Kern Hall

Mailing Address

11 Brookmeade Ct.

City

Sterling

State

VA

Zip Code

20165

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.14489

**B.**

Full Name (Last, First, Middle Initial)

Kern Hall

Mailing Address

11 Brookmeade Ct.

City

Sterling

State

VA

Zip Code

20165

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.15564

**C.**

Full Name (Last, First, Middle Initial)

Kern Hall

Mailing Address

11 Brookmeade Ct.

City

Sterling

State

VA

Zip Code

20165

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.16323

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) RABIEE HAMID Mailing Address 2787 EUREKA WAY City State Zip Code REDDING CA 96001 FEC ID number of contributing federal political committee. Name of Employer Self Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 5 / 2 0 0 7
	Amount of Each Receipt this Period 250.00
	CONTRIBUTION
	Transaction ID: SA17A.13757
	Full Name (Last, First, Middle Initial) Berg Helge Mailing Address 29601 David Lane City State Zip Code Newberg OR 97132 FEC ID number of contributing federal political committee. Name of Employer self Occupation Physician Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Amount of Each Receipt this Period 37.75	
CONTRIBUTION	
Transaction ID: SA17A.14453	
<b>C.</b> Full Name (Last, First, Middle Initial) Lippes jack Mailing Address 31b Hampton Hill Drive City State Zip Code Buffalo NY 14221 FEC ID number of contributing federal political committee. Name of Employer Jack Lippes Occupation physician (ret) Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 7
	Amount of Each Receipt this Period 300.00
	CONTRIBUTION
	Transaction ID: SA17A.14934
	Full Name (Last, First, Middle Initial) Lippes jack Mailing Address 31b Hampton Hill Drive City State Zip Code Buffalo NY 14221 FEC ID number of contributing federal political committee. Name of Employer Jack Lippes Occupation physician (ret) Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Amount of Each Receipt this Period 300.00	
CONTRIBUTION	
Transaction ID: SA17A.14934	

**SUBTOTAL** of Receipts This Page (optional) .....

587.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

HURT JAMES

Mailing Address

P.O. BOX 322

City

SAVOY

State

IL

Zip Code

61874

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 7

Amount of Each Receipt this Period

55.00

CONTRIBUTION

Transaction ID: SA17A.14113

**B.**

Full Name (Last, First, Middle Initial)

Moore James

Mailing Address

PO Box 418

City

Walsenburg

State

CO

Zip Code

81089

FEC ID number of contributing  
federal political committee.

Name of Employer

Town of Aguilar

Occupation

Office Manager

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Transaction ID: SA17A.14437

**C.**

Full Name (Last, First, Middle Initial)

Richardson James

Mailing Address

3614 Hillview Close

City

Montgomery

State

AL

Zip Code

36106

FEC ID number of contributing  
federal political committee.

Name of Employer  
Richardson and Associates  
Architects

Occupation

Architectural Assistant

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16666

**SUBTOTAL** of Receipts This Page (optional) .....

605.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Maunz Jamie

Mailing Address

130 Jackson St Apt 4C

City

New York

State

NY

Zip Code

11211

FEC ID number of contributing  
federal political committee.

Name of Employer  
NY Air National Guard

Occupation

Pilot

Receipt For:

2008

☒ X

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16598

**B.**

Full Name (Last, First, Middle Initial)

FADIMAN JEFFREY

Mailing Address

310 EL GRANADA BLVD

City

HALF MOON BAY

State

CA

Zip Code

94019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 0 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.18235

**C.**

Full Name (Last, First, Middle Initial)

Haley Jeffrey

Mailing Address

930 South 23rd St.

City

Fort Dodge

State

IA

Zip Code

50501

FEC ID number of contributing  
federal political committee.

Name of Employer  
Fort Dodge Animal Health

Occupation

Chemist

Receipt For:

2008

☒ X

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.13906

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Haley Jeffrey</p> <p>Mailing Address 930 South 23rd St.</p> <p>City State Zip Code Fort Dodge IA 50501</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Fort Dodge Animal Health</p> <p>Occupation Chemist</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 270.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 9 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14031</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) huebner jerold</p> <p>Mailing Address 449 Troutman St #33</p> <p>City State Zip Code Brooklyn NY 11237</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Simpson, Thacher &amp; Bartlett LLP</p> <p>Occupation paralegal</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 4 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 75.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16114</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) huebner jerold</p> <p>Mailing Address 449 Troutman St #33</p> <p>City State Zip Code Brooklyn NY 11237</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Simpson, Thacher &amp; Bartlett LLP</p> <p>Occupation paralegal</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 356.82</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 106.82</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15622</p>

**SUBTOTAL** of Receipts This Page (optional) .....

206.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

huebner jerold

Mailing Address

449 Troutman St #33

City

Brooklyn

State

NY

Zip Code

11237

FEC ID number of contributing  
federal political committee.

Name of Employer  
Simpson, Thatcher & Bartle-  
tt LLP

Occupation  
paralegal

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

456.82

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16449

**B.**

Full Name (Last, First, Middle Initial)

Sanguinetti John

Mailing Address

416 E Ivy

City

Mount Shasta

State

CA

Zip Code

96067

FEC ID number of contributing  
federal political committee.

Name of Employer  
self

Occupation  
electrical

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.13669

**C.**

Full Name (Last, First, Middle Initial)

To John

Mailing Address

913 Oakridge Dr

City

Kingsford

State

MI

Zip Code

49802

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.16042

**SUBTOTAL** of Receipts This Page (optional) .....

2425.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b> Full Name (Last, First, Middle Initial) Duerbeck Jonathan</p> <p>Mailing Address 3198 W. 6th St.</p> <p>City State Zip Code Fayetteville AR 72704</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Tulsa Public Schools</p> <p>Occupation substitute teacher</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>300.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 2 / 1 9 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  150.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14032</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Cassel Jordan</p> <p>Mailing Address 11069 Crystal Crest Ct</p> <p>City State Zip Code Las Vegas NV 89135</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer WaMu</p> <p>Occupation Loan Consultant</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>250.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 0 / 0 1 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  250.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14360</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Gomez Jorge I.</p> <p>Mailing Address 21523 Longwood</p> <p>City State Zip Code San Antonio TX 78259</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer USAF</p> <p>Occupation Retired Military</p> <p>Receipt For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>650.00</p>	<p>Date of Receipt  M M / D D / Y Y Y Y Y  1 2 / 0 6 / 2 0 0 7</p> <p>Amount of Each Receipt this Period  100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16448</p>

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Lekach joshua</p> <p>Mailing Address 137 golden beach dr.</p> <p>City State Zip Code golden beach FL 33160</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer LQD Adrenalina</p> <p>Occupation Film Producer</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1190.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 800.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15149</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Lekach joshua</p> <p>Mailing Address 137 golden beach dr.</p> <p>City State Zip Code golden beach FL 33160</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer LQD Adrenalina</p> <p>Occupation Film Producer</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 1050.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16635</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Estes Julie</p> <p>Mailing Address 8255 Buena Vista Ave</p> <p>City State Zip Code Los Molinos CA 96055</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer none</p> <p>Occupation disabled</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 265.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 7 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14021</p>

**SUBTOTAL** of Receipts This Page (optional) .....

1950.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Mitchell Justin

Mailing Address

615 2nd St/Graehl

City

Fairbanks

State

AK

Zip Code

99701

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
teacher

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 1 / 2 0 0 7

Amount of Each Receipt this Period

111.00

CONTRIBUTION

Transaction ID: SA17A.15824

B.

Full Name (Last, First, Middle Initial)

Mitchell Justin

Mailing Address

615 2nd St/Graehl

City

Fairbanks

State

AK

Zip Code

99701

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
teacher

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16397

C.

Full Name (Last, First, Middle Initial)

Mitchell Justin

Mailing Address

615 2nd St/Graehl

City

Fairbanks

State

AK

Zip Code

99701

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
teacher

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16692

**SUBTOTAL** of Receipts This Page (optional) .....

211.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Sobodash Justin

Mailing Address

909 N. San Vicente Bl., Apartment

City

West Hollywood

State

CA

Zip Code

90069

FEC ID number of contributing  
federal political committee.

Name of Employer  
Baker & Hostetler

Occupation

LLP/Attorney

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16459

**B.**

Full Name (Last, First, Middle Initial)

Clark Kathleen

Mailing Address

2346 1/2 Walton Way

City

Augusta

State

GA

Zip Code

30904

FEC ID number of contributing  
federal political committee.

Name of Employer  
Medical College of Georgia

Occupation

Assitant Professor

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14636

**C.**

Full Name (Last, First, Middle Initial)

do khiem

Mailing Address

21520 yorba linda blvd

suiteG#343

City

yorba linda

State

CA

Zip Code

92887

FEC ID number of contributing  
federal political committee.

Name of Employer  
Viet Hung Paris

Occupation

managerial

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.14701

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

do khiem

Mailing Address

21520 yorba linda blvd

suiteG#343

City

yorba linda

State

CA

Zip Code

92887

FEC ID number of contributing  
federal political committee.

Name of Employer  
Viet Hung Paris

Occupation  
managerial

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.13661

**B.**

Full Name (Last, First, Middle Initial)

do khiem

Mailing Address

21520 yorba linda blvd

suiteG#343

City

yorba linda

State

CA

Zip Code

92887

FEC ID number of contributing  
federal political committee.

Name of Employer  
Viet Hung Paris

Occupation  
managerial

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 2 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.13992

**C.**

Full Name (Last, First, Middle Initial)

Malmquist Kris

Mailing Address

46 Birkdell Drive

City

Russellville

State

AL

Zip Code

35654

FEC ID number of contributing  
federal political committee.

Name of Employer  
North Alabama Radiopharma-  
cy

Occupation  
Nuclear Pharmacist

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16357

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Goul Lanita

Mailing Address

4407 SE Maryland Ave

City

Topeka

State

KS

Zip Code

66609

FEC ID number of contributing  
federal political committee.

Name of Employer  
Payless ShoeSource

Occupation

Project Manager

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

256.97

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 9 / 2 0 0 7

Amount of Each Receipt this Period

56.97

CONTRIBUTION

Transaction ID: SA17A.14033

**B.**

Full Name (Last, First, Middle Initial)

Kistler Larry

Mailing Address

1641 Prospect Street

City

Belmont

State

CA

Zip Code

94002

FEC ID number of contributing  
federal political committee.

Name of Employer  
VMware

Occupation

Computer Technical Trainer

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16358

**C.**

Full Name (Last, First, Middle Initial)

Ralys Leonard

Mailing Address

26944 Avenida Las Palmas

City

Capistrano Beach

State

CA

Zip Code

92624

FEC ID number of contributing  
federal political committee.

Name of Employer  
Harbor Heating and Air

Occupation

HVAC Installation Tech

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.14868

**SUBTOTAL** of Receipts This Page (optional) .....

256.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Perry Lewis</p> <p>Mailing Address 54 Barbourtown Road</p> <p>City State Zip Code Canton Center CT 06020</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Perry Technology Corporation</p> <p>Occupation Machinist</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 500.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16712</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) ford lori</p> <p>Mailing Address 148 Kirkland Rd.</p> <p>City State Zip Code Silver City NM 88061</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Broad Mind Media, Inc.</p> <p>Occupation Media</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>265.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 1 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 75.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.13807</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) ford lori</p> <p>Mailing Address 148 Kirkland Rd.</p> <p>City State Zip Code Silver City NM 88061</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Broad Mind Media, Inc.</p> <p>Occupation Media</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>290.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 25.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.13946</p>

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Cassel Lynne

Mailing Address

7127 Mission Hills dr.

City

Las Vegas

State

NV

Zip Code

89113

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
none

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14363

**B.**

Full Name (Last, First, Middle Initial)

Mosier Lynne G.

Mailing Address

76 Patrick Way

City

Half Moon Bay

State

CA

Zip Code

94019

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation  
SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 0 / 2 0 0 7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.16863

**C.**

Full Name (Last, First, Middle Initial)

Barber Mary

Mailing Address

2839 Chesterfield PI, NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

Name of Employer  
RTI International

Occupation  
Scientist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14725

**SUBTOTAL** of Receipts This Page (optional) .....

2800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Henry Matt Mailing Address 19655 E. Mullan Rd City State Zip Code Clinton MT 59825 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 7 Amount of Each Receipt this Period 250.00 CONTRIBUTION Transaction ID: SA17A.13951
Name of Employer Clinton Elementary School Occupation Principa Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 450.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Haas Matthew Mailing Address 181 East Third Street Apartment 101 City State Zip Code Corning NY 14830 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7 Amount of Each Receipt this Period 50.00 CONTRIBUTION Transaction ID: SA17A.13589
Name of Employer Corning Community College Occupation Instructor Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Haas Matthew Mailing Address 181 East Third Street Apartment 101 City State Zip Code Corning NY 14830 FEC ID number of contributing federal political committee.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 7 Amount of Each Receipt this Period 25.00 CONTRIBUTION Transaction ID: SA17A.14984
Name of Employer Corning Community College Occupation Instructor Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 275.00		

**SUBTOTAL** of Receipts This Page (optional) .....

325.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Haas Matthew</p> <p>Mailing Address 181 East Third Street Apartment 101</p> <p>City State Zip Code Corning NY 14830</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Corning Community College</p> <p>Occupation Instructor</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>307.12</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 32.12</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.13753</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Haas Matthew</p> <p>Mailing Address 181 East Third Street Apartment 101</p> <p>City State Zip Code Corning NY 14830</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Corning Community College</p> <p>Occupation Instructor</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>322.47</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 15.35</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.13907</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Ferro Michael</p> <p>Mailing Address 4281 Knoll Ave</p> <p>City State Zip Code Oakland CA 94619</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Community Drug Council</p> <p>Occupation Therapist</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14389</p>

**SUBTOTAL** of Receipts This Page (optional) .....

297.47

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Ferro Michael

Mailing Address

4281 Knoll Ave

City

Oakland

State

CA

Zip Code

94619

FEC ID number of contributing  
federal political committee.

Name of Employer  
Community Drug Council

Occupation  
Therapist

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16698

**B.**

Full Name (Last, First, Middle Initial)

MINDEN MICHAEL

Mailing Address

P.O. BOX 490

City

VADER

State

WA

Zip Code

98593

FEC ID number of contributing  
federal political committee.

Name of Employer  
PRINTING ARTS CENTER

Occupation  
PRE-PRESS MGER

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.75

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.16706

**C.**

Full Name (Last, First, Middle Initial)

Winchell Michael

Mailing Address

196 Monmouth Ave

City

Atlantic Highlands

State

NJ

Zip Code

07716

FEC ID number of contributing  
federal political committee.

Name of Employer  
Decision Capital LLC

Occupation  
CEO

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.14713

**SUBTOTAL** of Receipts This Page (optional) .....

2425.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

JURIKA MICHELLE

Mailing Address

42 GLEN ALPINE ROAD

City

PIEDMONT

State

CA

Zip Code

94611

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.16860

B.

Full Name (Last, First, Middle Initial)

WALDROP MS

Mailing Address

8545 CARMEL VALLEY RD

City

CARMEL

State

CA

Zip Code

93923

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 0 7

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Transaction ID: SA17A.14291

C.

Full Name (Last, First, Middle Initial)

Hoagland Nancy

Mailing Address

24654 Rodeo Flat Rd

City

Auburn

State

CA

Zip Code

95602

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
none

Receipt For:

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1111.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 1 / 2 0 0 7

Amount of Each Receipt this Period

1111.00

CONTRIBUTION

Transaction ID: SA17A.15875

SUBTOTAL of Receipts This Page (optional) .....

4411.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

NY NEW YORK FUND RAISER

Mailing Address

NEW YORK

City

NEW YORK

State

NY

Zip Code

11030

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

614.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

614.00

CONTRIBUTION

Transaction ID: SA17A.14199

**B.**

Full Name (Last, First, Middle Initial)

kuc patricia

Mailing Address

222 cookstown-new egypt rd

City

wrightstown

State

NJ

Zip Code

08562

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
none

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 8 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16709

**C.**

Full Name (Last, First, Middle Initial)

Gorlach Paul

Mailing Address

22 Fort Pl.

City

Staten Island

State

NY

Zip Code

10301

FEC ID number of contributing  
federal political committee.

Name of Employer  
self

Occupation  
owner hotel/artist

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

206.46

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 5 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.13958

**SUBTOTAL** of Receipts This Page (optional) .....

814.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 194

(check only one)

☐ 16 ☒ 17a ☐ 17b ☐ 17c ☐ 17d ☐ 18  
☐ 19a ☐ 19b ☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Paypal Inc	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 7615 37th Ave	
City State Zip Code Jackson Heights NY 11372	Amount of Each Receipt this Period 1066.66
FEC ID number of contributing federal political committee.	
Name of Employer Occupation	DONATIONS DEPOSITED
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1066.66 <b>Transaction ID: SA17A.18194</b>
<b>B.</b> Full Name (Last, First, Middle Initial) JENKINS PETER	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 8950 MYRTLE DVE	
City State Zip Code DOUGLASVILLE GA 30134	Amount of Each Receipt this Period 77.00
FEC ID number of contributing federal political committee.	
Name of Employer Occupation	CONTRIBUTION
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 952.00 <b>Transaction ID: SA17A.15536</b>
<b>C.</b> Full Name (Last, First, Middle Initial) JENKINS PETER	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 7
Mailing Address 8950 MYRTLE DVE	
City State Zip Code DOUGLASVILLE GA 30134	Amount of Each Receipt this Period 77.00
FEC ID number of contributing federal political committee.	
Name of Employer Occupation	CONTRIBUTION
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1029.00 <b>Transaction ID: SA17A.16308</b>

**SUBTOTAL** of Receipts This Page (optional) .....

1220.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

MELE PETER

Mailing Address

P.O. BOX 533

City

CROWN POINT

State

NY

Zip Code

12928

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF

Occupation  
ENGINEER

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Transaction ID: SA17A.14165

**B.**

Full Name (Last, First, Middle Initial)

Wagner Peter

Mailing Address

69 Garfield Ave

Apt 1

City

Easthampton

State

MA

Zip Code

01027

FEC ID number of contributing  
federal political committee.

Name of Employer  
Prison Policy Initiative

Occupation  
attorney

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Amount of Each Receipt this Period

70.00

CONTRIBUTION

Transaction ID: SA17A.15340

**C.**

Full Name (Last, First, Middle Initial)

Tschang Pin-Seng

Mailing Address

883 winona blvd

City

Rochester

State

NY

Zip Code

14617

FEC ID number of contributing  
federal political committee.

Name of Employer  
None

Occupation  
engineer

Receipt For:

2008

☒ X

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14656

**SUBTOTAL** of Receipts This Page (optional) .....

1320.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

HRYCKO RAYMOND

Mailing Address

19822 SEMINOLE

City

REDFORD

State

MI

Zip Code

48240

FEC ID number of contributing  
federal political committee.

Name of Employer  
CHIBA EIWA HIGH SCHOOL

Occupation  
TEACHER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 1 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14342

**B.**

Full Name (Last, First, Middle Initial)

Morse Richard

Mailing Address

3 Fifth St. Apt 2

City

Cambridge

State

MA

Zip Code

02141

FEC ID number of contributing  
federal political committee.

Name of Employer  
Massachusetts General Hos-  
pital

Occupation  
Systems Administrator

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.15952

**C.**

Full Name (Last, First, Middle Initial)

Sloat Richard

Mailing Address

223 \*th Avenue

City

Iron River

State

MI

Zip Code

49935

FEC ID number of contributing  
federal political committee.

Name of Employer  
Gary L. Pisoni

Occupation  
surveying Technician

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

267.73

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

167.73

CONTRIBUTION

Transaction ID: SA17A.16828

**SUBTOTAL** of Receipts This Page (optional) .....

467.73

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Farwell Rick

Mailing Address

3441 N. Calle Largo

City

Tucson

State

AZ

Zip Code

85750

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self

Occupation

Land Surveyor

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

307.75

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14599

**B.**

Full Name (Last, First, Middle Initial)

Farwell Rick

Mailing Address

3441 N. Calle Largo

City

Tucson

State

AZ

Zip Code

85750

FEC ID number of contributing  
federal political committee.

Name of Employer  
Self

Occupation

Land Surveyor

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

332.75

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 5 / 2 0 0 7

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Transaction ID: SA17A.16761

**C.**

Full Name (Last, First, Middle Initial)

KRAUS ROBERT

Mailing Address

4702 BELMONT DR

City

EMMAUS

State

PA

Zip Code

18049

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14244

**SUBTOTAL** of Receipts This Page (optional) .....

525.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)  
LITOWITZ ROBERT

Mailing Address  
5500 COLLINS AVE #503

City State Zip Code  
MIAMI BEACH FL 33140

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF

Occupation  
INVENTOR

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.14193

**B.**

Full Name (Last, First, Middle Initial)  
Stephens Robert

Mailing Address  
343 Lexington Dr.

City State Zip Code  
Menlo Park CA 94025

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15998

**C.**

Full Name (Last, First, Middle Initial)  
chapman ron

Mailing Address  
7819 W. Montebello

City State Zip Code  
Glendale AZ 85303

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
retired

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

211.93

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

Amount of Each Receipt this Period

17.00

CONTRIBUTION

Transaction ID: SA17A.14098

**SUBTOTAL** of Receipts This Page (optional) .....

2567.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)  
chapman ron

Mailing Address

7819 W. Montebello

City

Glendale

State

AZ

Zip Code

85303

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

227.08

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Amount of Each Receipt this Period

15.15

CONTRIBUTION

Transaction ID: SA17A.14969

**B.**

Full Name (Last, First, Middle Initial)  
chapman ron

Mailing Address

7819 W. Montebello

City

Glendale

State

AZ

Zip Code

85303

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.18

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 2 / 2 0 0 7

Amount of Each Receipt this Period

10.10

CONTRIBUTION

Transaction ID: SA17A.15888

**C.**

Full Name (Last, First, Middle Initial)  
chapman ron

Mailing Address

7819 W. Montebello

City

Glendale

State

AZ

Zip Code

85303

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

252.33

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 7

Amount of Each Receipt this Period

15.15

CONTRIBUTION

Transaction ID: SA17A.16699

**SUBTOTAL** of Receipts This Page (optional) .....

40.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ANSIN RONALD</p> <p>Mailing Address 132 LITTLETON RD</p> <p>City State Zip Code HARVARD MA 01451</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer NONE</p> <p>Occupation RETIRED</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>2300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 2300.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14139</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Hite Rosemary</p> <p>Mailing Address 77500 South 6th St. Unit #B-18</p> <p>City State Zip Code Cottage Grove OR 97424</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>600.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.13677</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Hite Rosemary</p> <p>Mailing Address 77500 South 6th St. Unit #B-18</p> <p>City State Zip Code Cottage Grove OR 97424</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>650.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 0 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.14041</p>

**SUBTOTAL** of Receipts This Page (optional) .....

2450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Johnston Sage

Mailing Address

5191 Avispa Way

City

Austin

State

TX

Zip Code

78738

FEC ID number of contributing  
federal political committee.

Name of Employer  
3M

Occupation

Digitization Lead

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15273

**B.**

Full Name (Last, First, Middle Initial)

WRANGHAM SCOOT

Mailing Address

194 MESA COURT

City

LOUISVILLE

State

CO

Zip Code

80027

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14087

**C.**

Full Name (Last, First, Middle Initial)

Herrmann Sharon

Mailing Address

108 Kitty Drive

City

Grafton

State

VA

Zip Code

23692

FEC ID number of contributing  
federal political committee.

Name of Employer  
Colonial Williamsburg

Occupation

Waitress/Student

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13736

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Herrmann Sharon

Mailing Address

108 Kitty Drive

City

Grafton

State

VA

Zip Code

23692

FEC ID number of contributing  
federal political committee.

Name of Employer  
Colonial Williamsburg

Occupation

Waitress/Student

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 1 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.13821

**B.**

Full Name (Last, First, Middle Initial)

Herrmann Sharon

Mailing Address

108 Kitty Drive

City

Grafton

State

VA

Zip Code

23692

FEC ID number of contributing  
federal political committee.

Name of Employer  
Colonial Williamsburg

Occupation

Waitress/Student

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.16492

**C.**

Full Name (Last, First, Middle Initial)

Beltz Shawn

Mailing Address

4738 s 6th st

City

Louisville

State

KY

Zip Code

40214

FEC ID number of contributing  
federal political committee.

Name of Employer  
CompuCom

Occupation

System Administrator

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Transaction ID: SA17A.15460

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Collins Shawn

Mailing Address

302 jillwood drive

City

englewood

State

OH

Zip Code

45322

FEC ID number of contributing  
federal political committee.

Name of Employer  
miami valley hospital

Occupation  
mail clerk

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 7

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Transaction ID: SA17A.16713

**B.**

Full Name (Last, First, Middle Initial)

Bennett Sheila

Mailing Address

2405 Michael Ct

City

West Linn

State

OR

Zip Code

97068

FEC ID number of contributing  
federal political committee.

Name of Employer  
bpa

Occupation  
project management officer

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15732

**C.**

Full Name (Last, First, Middle Initial)

Bennett Sheila

Mailing Address

2405 Michael Ct

City

West Linn

State

OR

Zip Code

97068

FEC ID number of contributing  
federal political committee.

Name of Employer  
bpa

Occupation  
project management officer

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 2 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.16329

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Hammond Stephen	Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	0	7												
Mailing Address P.O. Box 1750																					
City State Zip Code Delta Junction AK 99737																					
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 500.00																				
Name of Employer Self	Occupation Engineer / Owner																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00 <b>CONTRIBUTION</b>  Transaction ID: SA17A.15338																				
<b>B.</b> Full Name (Last, First, Middle Initial) Van Landingham Steven	Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
Mailing Address 3721 E Cody Ave																					
City State Zip Code Gilbert AZ 85234																					
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 500.00																				
Name of Employer US Army	Occupation Soldier																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00 <b>CONTRIBUTION</b>  Transaction ID: SA17A.15365																				
<b>C.</b> Full Name (Last, First, Middle Initial) JIM STORK	Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	7		2	0	0	7												
Mailing Address 1109 E LAS OLAS BLVD																					
City State Zip Code FORT LAUDERDALE FL 33301																					
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 2300.00																				
Name of Employer self employed	Occupation restaurant owner																				
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00 <b>CONTRIBUTION</b>  Transaction ID: SA17A.14141																				

**SUBTOTAL** of Receipts This Page (optional) .....

3300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

WRANGHAM THERESA

Mailing Address

194 MESA COURT

City

LOUISVILLE

State

CO

Zip Code

80027

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.14089

**B.**

Full Name (Last, First, Middle Initial)

Hermann Thomas

Mailing Address

860 Roseway Terrace

City

Port Charlotte

State

FL

Zip Code

33948

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
Student

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15324

**C.**

Full Name (Last, First, Middle Initial)

Moran Thomas

Mailing Address

103 Calvin Place

City

Santa Cruz

State

CA

Zip Code

95060

FEC ID number of contributing  
federal political committee.

Name of Employer  
none

Occupation  
Student

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

211.87

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 7

Amount of Each Receipt this Period

36.87

CONTRIBUTION

Transaction ID: SA17A.15000

**SUBTOTAL** of Receipts This Page (optional) .....

536.87

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Thwaites Thomas

Mailing Address

1113 Centre LaneState College

City

State

Zip Code

State College

PA

16801

FEC ID number of contributing  
federal political committee.

Name of Employer  
None

Occupation  
retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15957

**B.**

Full Name (Last, First, Middle Initial)

ANTON VALERIE

Mailing Address

80 ROSS AVE

City

State

Zip Code

SAN ANSELMO

CA

94960

FEC ID number of contributing  
federal political committee.

Name of Employer  
SELF

Occupation  
HOMEMAKER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.14195

**C.**

Full Name (Last, First, Middle Initial)

Schwarz Walter

Mailing Address

60 Morningside Commons

City

State

Zip Code

Brattleboro

VT

05301

FEC ID number of contributing  
federal political committee.

Name of Employer  
None

Occupation  
Retired Activist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Transaction ID: SA17A.15239

**SUBTOTAL** of Receipts This Page (optional) .....

2650.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Schwarz Walter</p> <p>Mailing Address 60 Morningside Commons</p> <p>City State Zip Code Brattleboro VT 05301</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer None</p> <p>Occupation Retired Activist</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>325.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 2 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16557</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Gillmore Walter H</p> <p>Mailing Address PSC 517, Boc RC</p> <p>City State Zip Code FPO AP AP 00000</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer None</p> <p>Occupation Retired USAF</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.15758</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Gillmore Walter H</p> <p>Mailing Address PSC 517, Boc RC</p> <p>City State Zip Code FPO AP AP 00000</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer None</p> <p>Occupation Retired USAF</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>450.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 7</p> <p>Amount of Each Receipt this Period 200.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17A.16196</p>

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 74 / 194

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Miller Warren

Mailing Address

N7454 Mariner Hills Circle

City

Elkhorn

State

WI

Zip Code

53121

FEC ID number of contributing  
federal political committee.

Name of Employer  
WLM Underhill LLC

Occupation

IT Consultant

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 0 7

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Transaction ID: SA17A.15260

**B.**

Full Name (Last, First, Middle Initial)

JURIKA WILLIAM

Mailing Address

42 GLEN ALPINE ROAD

City

PIEDMONT

State

CA

Zip Code

94611

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 7

Amount of Each Receipt this Period

2300.00

CONTRIBUTION

Transaction ID: SA17A.16858

**C.**

Full Name (Last, First, Middle Initial)

Taylor William

Mailing Address

1600 15eh ave south

City

birmingham

State

AL

Zip Code

35205

FEC ID number of contributing  
federal political committee.

Name of Employer  
self

Occupation

artist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 8 / 2 0 0 7

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16230

**SUBTOTAL** of Receipts This Page (optional) .....

2600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3P)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 194

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

sterling-kfoury yasmin

Mailing Address

94 upland road

City

winthrop

State

MA

Zip Code

02152

FEC ID number of contributing  
federal political committee.

Name of Employer  
melt

Occupation

image consultant

Receipt For: 2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
11 / 27 / 2007

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Transaction ID: SA17A.16147

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

69531.73

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 76 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

AirTran Airways

Mailing Address 1745 Phoenix Blvd  
Suite 370

City Atlanta State GA Zip Code 30349

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17976

Date of Disbursement

11 / 13 / 2007

Amount of Each Disbursement this Period

254.80

**B.**

Full Name (Last, First, Middle Initial)

ALASKA AIR

Mailing Address P.O. Box 24948

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18014

Date of Disbursement

11 / 20 / 2007

Amount of Each Disbursement this Period

249.40

**C.**

Full Name (Last, First, Middle Initial)

COLVIN ALEXANDER

Mailing Address 1401 N Taft #625

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
CONSULTING FEES MEDIA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17884

Date of Disbursement

10 / 23 / 2007

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2004.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)  
COLVIN ALEXANDER

Mailing Address 1401 N Taft #625

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
CONSULTING FEES MEDIA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17954

Date of Disbursement

11 / 05 / 2007

Amount of Each Disbursement this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)  
COLVIN ALEXANDER

Mailing Address 1401 N Taft #625

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
CONSULTING FEES MEDIA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18036

Date of Disbursement

11 / 27 / 2007

Amount of Each Disbursement this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)  
COLVIN ALEXANDER

Mailing Address 1401 N Taft #625

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
CONSULTING FEES MEDIA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18104

Date of Disbursement

12 / 10 / 2007

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) ALLEGIAN AIR	<b>Transaction ID:</b> SB23.18099 <b>Date of Disbursement</b>
Mailing Address P.O. Box 33244	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 7 / 2 0 0 7</div> </div>
City LAS VAGAS State NV Zip Code 89128	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement TRAVEL EXPENSES	<div>257.90</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	<b>Transaction ID:</b> SB23.17833 <b>Date of Disbursement</b>
Mailing Address 2500 VICTORY AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
City DALLAS State TX Zip Code 75219	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement TRAVEL EXPENSES	<div>141.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) AMERICAN AIRLINES	<b>Transaction ID:</b> SB23.17834 <b>Date of Disbursement</b>
Mailing Address 2500 VICTORY AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
City DALLAS State TX Zip Code 75219	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement TRAVEL EXPENSES	<div>141.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

540.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address 2500 VICTORY AVENUE

City DALLAS State TX Zip Code 75219

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17863

Date of Disbursement

10 / 18 / 2007

Amount of Each Disbursement this Period

123.00

**B.**

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address 2500 VICTORY AVENUE

City DALLAS State TX Zip Code 75219

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17898

Date of Disbursement

10 / 25 / 2007

Amount of Each Disbursement this Period

159.40

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address 2500 VICTORY AVENUE

City DALLAS State TX Zip Code 75219

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17899

Date of Disbursement

10 / 25 / 2007

Amount of Each Disbursement this Period

159.40

**SUBTOTAL** of Disbursements This Page (optional) .....

441.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address 2500 VICTORY AVENUE

City DALLAS State TX Zip Code 75219

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18003

Date of Disbursement

11 / 19 / 2007

Amount of Each Disbursement this Period

294.30

**B.**

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address 2500 VICTORY AVENUE

City DALLAS State TX Zip Code 75219

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18082

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

Mailing Address 2500 VICTORY AVENUE

City DALLAS State TX Zip Code 75219

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18083

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

5.00

**SUBTOTAL** of Disbursements This Page (optional) .....

399.30

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>AMERICAN EXPRESS COLLECTIONS</b></p> <p>Mailing Address <b>PO Box 731 Rocky</b></p> <p>City <b>HILL</b> State <b>NJ</b> Zip Code <b>08553</b></p> <p>Purpose of Disbursement  <b>CREDIT CARD MERCHANT PROCESSING FEES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID: SB23.17819</b>          Date of Disbursement          10 / 10 / 2007</p> <p>Amount of Each Disbursement this Period          4.50</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>AMERICAN EXPRESS COLLECTIONS</b></p> <p>Mailing Address <b>PO Box 731 Rocky</b></p> <p>City <b>HILL</b> State <b>NJ</b> Zip Code <b>08553</b></p> <p>Purpose of Disbursement  <b>CREDIT CARD MERCHANT PROCESSING FEES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID: SB23.17835</b>          Date of Disbursement          10 / 15 / 2007</p> <p>Amount of Each Disbursement this Period          117.35</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>AMERICAN EXPRESS COLLECTIONS</b></p> <p>Mailing Address <b>PO Box 731 Rocky</b></p> <p>City <b>HILL</b> State <b>NJ</b> Zip Code <b>08553</b></p> <p>Purpose of Disbursement  <b>CREDIT CARD MERCHANT PROCESSING FEES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID: SB23.17977</b>          Date of Disbursement          11 / 13 / 2007</p> <p>Amount of Each Disbursement this Period          4.50</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**126.35**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 82 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN EXPRESS COLLECTIONS

Mailing Address PO Box 731 Rocky

City HILL State NJ Zip Code 08553

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17983

Date of Disbursement

11 / 14 / 2007

Amount of Each Disbursement this Period

85.66

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN EXPRESS COLLECTIONS

Mailing Address PO Box 731 Rocky

City HILL State NJ Zip Code 08553

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18115

Date of Disbursement

12 / 11 / 2007

Amount of Each Disbursement this Period

4.50

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN EXPRESS COLLECTIONS

Mailing Address PO Box 731 Rocky

City HILL State NJ Zip Code 08553

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18138

Date of Disbursement

12 / 14 / 2007

Amount of Each Disbursement this Period

104.19

**SUBTOTAL** of Disbursements This Page (optional) .....

194.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 83 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

AMTRAK INTERCITY

Mailing Address 110 Callahan Drive,

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17886

Date of Disbursement

10 / 23 / 2007

Amount of Each Disbursement this Period

78.20

B.

Full Name (Last, First, Middle Initial)

AMTRAK INTERCITY

Mailing Address 110 Callahan Drive,

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17989

Date of Disbursement

11 / 15 / 2007

Amount of Each Disbursement this Period

17.00

C.

Full Name (Last, First, Middle Initial)

APA MUSIC AND PICTURES

Mailing Address 948 Thomas Dr

City Warminster State PA Zip Code 18974

Purpose of Disbursement  
CONFERENCE RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17966

Date of Disbursement

11 / 06 / 2007

Amount of Each Disbursement this Period

7500.21

SUBTOTAL of Disbursements This Page (optional) .....

7595.41

TOTAL This Period (last page this line number only) .....

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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

State:  District:

MM / DD / YYYY

97.83

State:  District:

MM / DD / YYYY

206.76

State:  District:

MM / DD / YYYY

31.09

**335.68**

FEC Schedule B ( Form 3P)

**SCHEDULE B (FEC Form 3P)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 85 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

AUTHORIZENET CORP

**Transaction ID:** SB23.17944

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	0	7

Mailing Address 915 SOUTH 500 EAST  
SUITE 200

Amount of Each Disbursement this Period

City AMERICAN FORK State UT Zip Code 84003

201.00

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

AUTHORIZENET CORP

**Transaction ID:** SB23.18074

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	7

Mailing Address 915 SOUTH 500 EAST  
SUITE 200

Amount of Each Disbursement this Period

City AMERICAN FORK State UT Zip Code 84003

158.60

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

BECKY ISAIS

**Transaction ID:** SB23.18030

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	6	/	2	0	0	7

Mailing Address C/O CAMPAIGN HQ  
P.O BOX 948

Amount of Each Disbursement this Period

City ARLINGTON State VA Zip Code 22216

500.00

Purpose of Disbursement  
CONSULTING FUND RAISING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) .....

859.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 86 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

BEST WESTERN

Mailing Address 20400 N 29TH AVE

City  
PHOENIX

State  
AZ

Zip Code  
85027

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.17938

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

745.56

**B.**

Full Name (Last, First, Middle Initial)

BEST WESTERN

Mailing Address 20400 N 29TH AVE

City  
PHOENIX

State  
AZ

Zip Code  
85027

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.17945

Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

699.03

**C.**

Full Name (Last, First, Middle Initial)

BEST WESTERN

Mailing Address 20400 N 29TH AVE

City  
PHOENIX

State  
AZ

Zip Code  
85027

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.18093

Date of Disbursement

12 / 06 / 2007

Amount of Each Disbursement this Period

89.21

**SUBTOTAL** of Disbursements This Page (optional) .....

1533.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 87 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)  
**BEST WESTERN**

Mailing Address **20400 N 29TH AVE**

City **PHOENIX** State **AZ** Zip Code **85027**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18105**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**366.23**

**B.**

Full Name (Last, First, Middle Initial)  
**Petherick Chris**

Mailing Address **16305 Woodville Rd.**

City **Brandywine** State **MD** Zip Code **20613**

Purpose of Disbursement  
**CONSULTING CAMPAIGN MAGT**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17872**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**3729.00**

**C.**

Full Name (Last, First, Middle Initial)  
**Petherick Chris**

Mailing Address **16305 Woodville Rd.**

City **Brandywine** State **MD** Zip Code **20613**

Purpose of Disbursement  
**CONSULTING CAMPAIGN MAGT**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17956**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**2000.00**

**SUBTOTAL** of Disbursements This Page (optional) .....

**6095.23**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 88 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)

Petherick Chris

Mailing Address 16305 Woodville Rd.

City Brandywine State MD Zip Code 20613

Purpose of Disbursement  
 COSULTING CAMPAIGN MAGT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17998**

Date of Disbursement

11 / 16 / 2007

Amount of Each Disbursement this Period

1749.00

**B.**

Full Name (Last, First, Middle Initial)

Petherick Chris

Mailing Address 16305 Woodville Rd.

City Brandywine State MD Zip Code 20613

Purpose of Disbursement  
 CONSULTING CAMPAIGN MAGT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18021**

Date of Disbursement

11 / 23 / 2007

Amount of Each Disbursement this Period

3749.00

**C.**

Full Name (Last, First, Middle Initial)

Petherick Chris

Mailing Address 16305 Woodville Rd.

City Brandywine State MD Zip Code 20613

Purpose of Disbursement  
 EXPENSE REIMBURSEMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18022**

Date of Disbursement

11 / 23 / 2007

Amount of Each Disbursement this Period

307.04

**SUBTOTAL** of Disbursements This Page (optional) .....

5805.04

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 89 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

CINGULAR WIRELESS

Mailing Address P.O.BOX 6463

City  
CAROL STREAM

State  
IL

Zip Code  
60197

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18084

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

160.45

**B.**

Full Name (Last, First, Middle Initial)

CINGULAR WIRELESS

Mailing Address P.O.BOX 6463

City  
CAROL STREAM

State  
IL

Zip Code  
60197

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18094

Date of Disbursement

12 / 06 / 2007

Amount of Each Disbursement this Period

178.38

**C.**

Full Name (Last, First, Middle Initial)

CINGULAR WIRELESS

Mailing Address P.O.BOX 6463

City  
CAROL STREAM

State  
IL

Zip Code  
60197

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18095

Date of Disbursement

12 / 06 / 2007

Amount of Each Disbursement this Period

139.70

**SUBTOTAL** of Disbursements This Page (optional) .....

478.53

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 90 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

CINGULAR WIRELESS

Mailing Address P.O.BOX 6463

City  
CAROL STREAM

State  
IL

Zip Code  
60197

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18165

Date of Disbursement

12 / 27 / 2007

Amount of Each Disbursement this Period

207.88

**B.**

Full Name (Last, First, Middle Initial)

ALEXANDER S COLVIN

Mailing Address 1401 N Taft #625

City  
ARLINGTON

State  
VA

Zip Code  
22201

Purpose of Disbursement  
CONSULTING FEE MEDIA

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.16952

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

COMCAST CABLE

Mailing Address P.O. BOX 196

City  
NEWALK

State  
NJ

Zip Code  
07101

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17999

Date of Disbursement

11 / 16 / 2007

Amount of Each Disbursement this Period

208.14

**SUBTOTAL** of Disbursements This Page (optional) .....

1916.02

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 91 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)  
**COMCAST OF ALEXANDRIA**

Mailing Address **508-D S VAN DON ST**

City **ALEXANDRIA** State **VA** Zip Code **04612**

Purpose of Disbursement  
**TELEPHONE/INTERNET**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17873**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**500.00**

**B.**

Full Name (Last, First, Middle Initial)  
**COMMON MAN**

Mailing Address **Exit 13 of 1-93**

City **Concord** State **NH** Zip Code **03301**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17857**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**27.72**

**C.**

Full Name (Last, First, Middle Initial)  
**COMMON MAN**

Mailing Address **Exit 13 of 1-93**

City **Concord** State **NH** Zip Code **03301**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18045**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**57.77**

**SUBTOTAL** of Disbursements This Page (optional) .....

**585.49**

**TOTAL** This Period (last page this line number only) .....

PAGE 92 / 194

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)  
COMMON MAN

Mailing AddressExit 13 of I-93

CityConcordStateNHZip Code03301

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary☐ General  
☐ Other (specify) ▼

State:District:

Transaction ID: SB23.18169  
Date of Disbursement  
MM / DD / YYYY  
12 / 28 / 2007

Amount of Each Disbursement this Period  
63.43

B.

Full Name (Last, First, Middle Initial)  
CONSTANT CONTACT

Mailing AddressReservoir Place 1601 Trapelo Road Suite 329

CityWalthamStateMAZip Code02451

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary☐ General  
☐ Other (specify) ▼

State:District:

Transaction ID: SB23.17894  
Date of Disbursement  
MM / DD / YYYY  
10 / 24 / 2007

Amount of Each Disbursement this Period  
155.00

C.

Full Name (Last, First, Middle Initial)  
CONSTANT CONTACT

Mailing AddressReservoir Place 1601 Trapelo Road Suite 329

CityWalthamStateMAZip Code02451

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary☐ General  
☐ Other (specify) ▼

State:District:

Transaction ID: SB23.18031  
Date of Disbursement  
MM / DD / YYYY  
11 / 26 / 2007

Amount of Each Disbursement this Period  
155.00

**373.43**

FEC Schedule B (Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 93 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)

**CONSTANT CONTACT**

Mailing Address **Reservoir Place 1601 Trapelo Road  
Suite 329**

City **Waltham** State **MA** Zip Code **02451**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18157**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**125.00**

**B.**

Full Name (Last, First, Middle Initial)

**CONTINENTAL AIRLINES INC**

Mailing Address **1600 Smith Street**

City **Houston** State **TX** Zip Code **77002**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17858**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**277.80**

**C.**

Full Name (Last, First, Middle Initial)

**CONTINENTAL AIRLINES INC**

Mailing Address **1600 Smith Street**

City **Houston** State **TX** Zip Code **77002**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17926**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**329.80**

**SUBTOTAL** of Disbursements This Page (optional) .....

**732.60**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 94 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)  
**CONTINENTAL AIRLINES INC**

Mailing Address **1600 Smith Street**

City **Houston** State **TX** Zip Code **77002**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17990**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**199.80**

**B.**

Full Name (Last, First, Middle Initial)  
**Nelson-VanDette David**

Mailing Address **202 EAST CASS ST**

City **TAMPA** State **FL** Zip Code **33609**

Purpose of Disbursement  
**PRINTING AND STATIONARY**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17852**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**434.45**

**C.**

Full Name (Last, First, Middle Initial)  
**Nelson-VanDette David**

Mailing Address **202 EAST CASS ST**

City **TAMPA** State **FL** Zip Code **33609**

Purpose of Disbursement  
**PRINTING AND STATIONARY**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18037**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**926.97**

**SUBTOTAL** of Disbursements This Page (optional) .....

**1561.22**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) PETRI DEBORA	<b>Transaction ID:</b> SB23.18149 <b>Date of Disbursement</b>
Mailing Address 761 VIOLET MEADOW ST S	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 0 / 2 0 0 7</div> </div>
City Tacoma State WA Zip Code 98444	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement WEBSITE MANAGEMENT	<div>500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) DELTA AIR	<b>Transaction ID:</b> SB23.17809 <b>Date of Disbursement</b>
Mailing Address P.O. Box 20532	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 9 / 2 0 0 7</div> </div>
City Atlanta State GA Zip Code 30320	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement TRAVEL EXPENSES	<div>773.90</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) DELTA AIR	<b>Transaction ID:</b> SB23.18211 <b>Date of Disbursement</b>
Mailing Address P.O. Box 20532	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
City Atlanta State GA Zip Code 30320	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement AIRLINE TICKET REFUND	<div>-773.90</div>
Candidate Name	<div>101 Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

DELTA AIR

Mailing Address P.O. Box 20532

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18046

Date of Disbursement

11 / 29 / 2007

Amount of Each Disbursement this Period

457.80

**B.**

Full Name (Last, First, Middle Initial)

DELTA AIR

Mailing Address P.O. Box 20532

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18085

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

299.60

**C.**

Full Name (Last, First, Middle Initial)

DELTA AIR

Mailing Address P.O. Box 20532

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18131

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

199.30

**SUBTOTAL** of Disbursements This Page (optional) .....

956.70

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3P)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

TUCKER DORTHY

Transaction ID: SB23.17802

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	0	7

Mailing Address C/O CAMPAIGN HQ  
P.O BOX 948

City ARLINGTON State VA Zip Code 22216

Purpose of Disbursement  
TENT RENTAL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

1484.37

**B.**

Full Name (Last, First, Middle Initial)

ELLEN REYNOLDS

Transaction ID: SB23.17948

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	0	7

Mailing Address 7 ROBINSON LANE

City MOUNT PRESENT State ME Zip Code 04660

Purpose of Disbursement  
RENTAL NH

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

800.00

**C.**

Full Name (Last, First, Middle Initial)

ELLEN REYNOLDS

Transaction ID: SB23.17949

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	2		2	0	0	7

Mailing Address 7 ROBINSON LANE

City MOUNT PRESENT State ME Zip Code 04660

Purpose of Disbursement  
RENTAL NH

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

1200.00

SUBTOTAL of Disbursements This Page (optional) .....

3484.37

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 98 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

JACOBSON ELLIOT

Mailing Address 1101 3RD STREET, SW  
APT201

City WASHINGTON State DC Zip Code 20021

Purpose of Disbursement  
CONSULTING FUND RAISING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17806

Date of Disbursement

10 / 04 / 2007

Amount of Each Disbursement this Period

3300.00

**B.**

Full Name (Last, First, Middle Initial)

JACOBSON ELLIOT

Mailing Address 1101 3RD STREET, SW  
APT201

City WASHINGTON State DC Zip Code 20021

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17874

Date of Disbursement

10 / 22 / 2007

Amount of Each Disbursement this Period

534.02

**C.**

Full Name (Last, First, Middle Initial)

JACOBSON ELLIOT

Mailing Address 1101 3RD STREET, SW  
APT201

City WASHINGTON State DC Zip Code 20021

Purpose of Disbursement  
CONSULTING FUND RAISING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17959

Date of Disbursement

11 / 05 / 2007

Amount of Each Disbursement this Period

3300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7134.02

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 100 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)

**FEDEX SHOP**

Mailing Address **942 South Shady Grove Road**

City **MEMPHIS** State **TN** Zip Code **38120**

Purpose of Disbursement  
**PRINTING AND STATIONARY**

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17887**

Date of Disbursement

**10** / **23** / **2007**

Amount of Each Disbursement this Period

**122.44**

**B.**

Full Name (Last, First, Middle Initial)

**FEDEX SHOP**

Mailing Address **942 South Shady Grove Road**

City **MEMPHIS** State **TN** Zip Code **38120**

Purpose of Disbursement  
**PRINTING AND STATIONARY**

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17900**

Date of Disbursement

**10** / **25** / **2007**

Amount of Each Disbursement this Period

**200.34**

**C.**

Full Name (Last, First, Middle Initial)

**FEDEX SHOP**

Mailing Address **942 South Shady Grove Road**

City **MEMPHIS** State **TN** Zip Code **38120**

Purpose of Disbursement  
**PRINTING AND STATIONARY**

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17906**

Date of Disbursement

**10** / **26** / **2007**

Amount of Each Disbursement this Period

**44.31**

**SUBTOTAL** of Disbursements This Page (optional) .....

**367.09**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) FEDEX SHOP	<b>Transaction ID:</b> SB23.17907 <b>Date of Disbursement</b>
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 6 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement PRINTING AND STATIONARY	<div> <div></div> <div>90.00</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) FEDEX SHOP	<b>Transaction ID:</b> SB23.17910 <b>Date of Disbursement</b>
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 9 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement PRINTING AND STATIONARY	<div> <div></div> <div>21.09</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) FEDEX SHOP	<b>Transaction ID:</b> SB23.17911 <b>Date of Disbursement</b>
Mailing Address 942 South Shady Grove Road	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 9 / 2 0 0 7</div> </div>
City MEMPHIS State TN Zip Code 38120	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement PRINTING AND STATIONARY	<div> <div></div> <div>21.09</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**132.18**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 102 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

FEDEX SHOP

Mailing Address 942 South Shady Grove Road

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
PRINTING AND STATIONARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17912

Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

53.50

**B.**

Full Name (Last, First, Middle Initial)

FEDEX SHOP

Mailing Address 942 South Shady Grove Road

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
PRINTING AND STATIONARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17927

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

6.50

**C.**

Full Name (Last, First, Middle Initial)

FEDEX SHOP

Mailing Address 942 South Shady Grove Road

City State Zip Code  
MEMPHIS TN 38120

Purpose of Disbursement  
PRINTING AND STATIONARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17950

Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

16.69

**SUBTOTAL** of Disbursements This Page (optional) .....

76.69

**TOTAL** This Period (last page this line number only) .....

PAGE 103 / 194

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

**66.50**

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>FEDEX SHOP</b></p> <p>Mailing Address <b>942 South Shady Grove Road</b></p> <p>City <b>MEMPHIS</b> State <b>TN</b> Zip Code <b>38120</b></p> <p>Purpose of Disbursement  <b>PRINTING AND STATIONARY</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.18061</b>  Date of Disbursement  M M / D D / Y Y Y Y  <b>1 2 / 0 3 / 2 0 0 7</b></p> <p>Amount of Each Disbursement this Period  <b>25.80</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>FEDEX SHOP</b></p> <p>Mailing Address <b>942 South Shady Grove Road</b></p> <p>City <b>MEMPHIS</b> State <b>TN</b> Zip Code <b>38120</b></p> <p>Purpose of Disbursement  <b>PRINTING AND STATIONARY</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.18086</b>  Date of Disbursement  M M / D D / Y Y Y Y  <b>1 2 / 0 5 / 2 0 0 7</b></p> <p>Amount of Each Disbursement this Period  <b>80.82</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>FEDEX SHOP</b></p> <p>Mailing Address <b>942 South Shady Grove Road</b></p> <p>City <b>MEMPHIS</b> State <b>TN</b> Zip Code <b>38120</b></p> <p>Purpose of Disbursement  <b>PRINTING AND STATIONARY</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.18096</b>  Date of Disbursement  M M / D D / Y Y Y Y  <b>1 2 / 0 6 / 2 0 0 7</b></p> <p>Amount of Each Disbursement this Period  <b>25.80</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**132.42**

**TOTAL** This Period (last page this line number only) .....



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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

FE1AN060.PDF

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 106 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)  
**FOUR POINTS SHERATON**

Mailing Address **9750 AIRPORT BLVD**

City **LOS ANGELES** State **CA** Zip Code **90045**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17840**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**312.08**

**B.**

Full Name (Last, First, Middle Initial)  
**FOUR POINTS SHERATON**

Mailing Address **9750 AIRPORT BLVD**

City **LOS ANGELES** State **CA** Zip Code **90045**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18110**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**283.39**

**C.**

Full Name (Last, First, Middle Initial)  
**FOUR POINTS SHERATON**

Mailing Address **9750 AIRPORT BLVD**

City **LOS ANGELES** State **CA** Zip Code **90045**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18132**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**178.66**

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**774.13**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)  
**GULF 9180**

Mailing Address **9180 Gulf Beach Hwy**

City **Pensacola** State **FL** Zip Code **32507**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18153**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
**GULF 9180**

Mailing Address **9180 Gulf Beach Hwy**

City **Pensacola** State **FL** Zip Code **32507**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18154**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**6.28**

**C.**

Full Name (Last, First, Middle Initial)  
**GULF 9180**

Mailing Address **9180 Gulf Beach Hwy**

City **Pensacola** State **FL** Zip Code **32507**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18158**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**29.01**

**SUBTOTAL** of Disbursements This Page (optional) .....

**135.29**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 108 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)  
**GULF 9180**

Mailing Address **9180 Gulf Beach Hwy**

City **Pensacola** State **FL** Zip Code **32507**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18172**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**33.75**

**B.**

Full Name (Last, First, Middle Initial)  
**HANNAFORD BROS CO**

Mailing Address **PO BOX 1000**

City **Portland** State **ME** Zip Code **04104**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17984**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**134.47**

**C.**

Full Name (Last, First, Middle Initial)  
**HANNAFORD BROS CO**

Mailing Address **PO BOX 1000**

City **Portland** State **ME** Zip Code **04104**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18007**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**93.82**

**SUBTOTAL** of Disbursements This Page (optional) .....

**262.04**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>HANNAFORD BROS CO</b> <hr/> Mailing Address <b>PO BOX 1000</b>	<b>Transaction ID: SB23.18025</b> Date of Disbursement <div> <div>11</div> <div>23</div> <div>2007</div> </div>
<div> <div>City Portland</div> <div>State ME</div> <div>Zip Code 04104</div> </div> <div> <div>Purpose of Disbursement TRAVEL EXPENSES</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> <div>Category/Type</div>	Amount of Each Disbursement this Period <div>81.38</div>
<b>B.</b> Full Name (Last, First, Middle Initial) <b>HANNAFORD BROS CO</b> <hr/> Mailing Address <b>PO BOX 1000</b>	<b>Transaction ID: SB23.18048</b> Date of Disbursement <div> <div>11</div> <div>29</div> <div>2007</div> </div>
<div> <div>City Portland</div> <div>State ME</div> <div>Zip Code 04104</div> </div> <div> <div>Purpose of Disbursement TRAVEL EXPENSES</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> <div>Category/Type</div>	Amount of Each Disbursement this Period <div>68.85</div>
<b>C.</b> Full Name (Last, First, Middle Initial) <b>HANNAFORD BROS CO</b> <hr/> Mailing Address <b>PO BOX 1000</b>	<b>Transaction ID: SB23.18062</b> Date of Disbursement <div> <div>12</div> <div>03</div> <div>2007</div> </div>
<div> <div>City Portland</div> <div>State ME</div> <div>Zip Code 04104</div> </div> <div> <div>Purpose of Disbursement TRAVEL EXPENSES</div> <div>Candidate Name</div> </div> <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div> <div>Category/Type</div>	Amount of Each Disbursement this Period <div>130.67</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**280.90**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 110 / 194

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

HANNAFORD BROS CO

Mailing Address PO BOX 1000

City  
Portland

State  
ME

Zip Code  
04104

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18063

Date of Disbursement

/   /

Amount of Each Disbursement this Period

130.67

B.

Full Name (Last, First, Middle Initial)

HANNAFORD BROS CO

Mailing Address PO BOX 1000

City  
Portland

State  
ME

Zip Code  
04104

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18097

Date of Disbursement

/   /

Amount of Each Disbursement this Period

67.28

C.

Full Name (Last, First, Middle Initial)

HANNAFORD BROS CO

Mailing Address PO BOX 1000

City  
Portland

State  
ME

Zip Code  
04104

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18117

Date of Disbursement

/   /

Amount of Each Disbursement this Period

57.87

**SUBTOTAL** of Disbursements This Page (optional) .....

255.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 111 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

HANNAFORD BROS CO

Mailing Address PO BOX 1000

City  
Portland

State  
ME

Zip Code  
04104

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18141

Date of Disbursement

/   /

Amount of Each Disbursement this Period

93.14

B.

Full Name (Last, First, Middle Initial)

HANNAFORD BROS CO

Mailing Address PO BOX 1000

City  
Portland

State  
ME

Zip Code  
04104

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18159

Date of Disbursement

/   /

Amount of Each Disbursement this Period

84.80

C.

Full Name (Last, First, Middle Initial)

HANNAFORD BROS CO

Mailing Address PO BOX 1000

City  
Portland

State  
ME

Zip Code  
04104

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18173

Date of Disbursement

/   /

Amount of Each Disbursement this Period

77.72

**SUBTOTAL** of Disbursements This Page (optional) .....

255.66

**TOTAL** This Period (last page this line number only) .....

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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) <b>HOLIDAY INN EXPRESS LAX</b>	<b>Transaction ID:</b> SB23.17842 <b>Date of Disbursement</b>
Mailing Address      14814 Hawthorne Boulevard	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">/</div> <div style="border: 1px solid black; padding: 2px;">D 15</div> <div style="border: 1px solid black; padding: 2px;">/</div> <div style="border: 1px solid black; padding: 2px;">Y 2007</div> </div>
<div style="display: flex; justify-content: space-between;"> <span>City Lawndale</span> <span>State CA</span> <span>Zip Code 90260</span> </div>	Amount of Each Disbursement this Period
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">         Purpose of Disbursement          TRAVEL EXPENSES       </div> <div style="width: 35%; border: 1px solid black; height: 30px;"></div> </div>	<div style="border: 1px solid black; padding: 5px; text-align: right;">104.94</div>
Candidate Name	Category/ Type
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">         Office Sought:    <input type="checkbox"/> House                                   <input type="checkbox"/> Senate                                   <input type="checkbox"/> President       </div> <div style="width: 70%;">         Disbursement For:      2008  <input checked="" type="checkbox"/> Primary      <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼       </div> </div>	
State:                  District:	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>HOLIDAY INN EXPRESS LAX</b>	<b>Transaction ID:</b> SB23.17843 <b>Date of Disbursement</b>
Mailing Address      14814 Hawthorne Boulevard	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">/</div> <div style="border: 1px solid black; padding: 2px;">D 15</div> <div style="border: 1px solid black; padding: 2px;">/</div> <div style="border: 1px solid black; padding: 2px;">Y 2007</div> </div>
<div style="display: flex; justify-content: space-between;"> <span>City Lawndale</span> <span>State CA</span> <span>Zip Code 90260</span> </div>	Amount of Each Disbursement this Period
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">         Purpose of Disbursement          TRAVEL EXPENSES       </div> <div style="width: 35%; border: 1px solid black; height: 30px;"></div> </div>	<div style="border: 1px solid black; padding: 5px; text-align: right;">324.82</div>
Candidate Name	Category/ Type
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">         Office Sought:    <input type="checkbox"/> House                                   <input type="checkbox"/> Senate                                   <input type="checkbox"/> President       </div> <div style="width: 70%;">         Disbursement For:      2008  <input checked="" type="checkbox"/> Primary      <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼       </div> </div>	
State:                  District:	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>HOLIDAY INN EXPRESS LAX</b>	<b>Transaction ID:</b> SB23.18015 <b>Date of Disbursement</b>
Mailing Address      14814 Hawthorne Boulevard	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">/</div> <div style="border: 1px solid black; padding: 2px;">D 20</div> <div style="border: 1px solid black; padding: 2px;">/</div> <div style="border: 1px solid black; padding: 2px;">Y 2007</div> </div>
<div style="display: flex; justify-content: space-between;"> <span>City Lawndale</span> <span>State CA</span> <span>Zip Code 90260</span> </div>	Amount of Each Disbursement this Period
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">         Purpose of Disbursement          TRAVEL EXPENSES       </div> <div style="width: 35%; border: 1px solid black; height: 30px;"></div> </div>	<div style="border: 1px solid black; padding: 5px; text-align: right;">291.44</div>
Candidate Name	Category/ Type
<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">         Office Sought:    <input type="checkbox"/> House                                   <input type="checkbox"/> Senate                                   <input type="checkbox"/> President       </div> <div style="width: 70%;">         Disbursement For:      2008  <input checked="" type="checkbox"/> Primary      <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼       </div> </div>	
State:                  District:	

**721.20**

FEC Schedule B (Form 3P)



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)  
**HOLIDAY INN EXPRESS LAX**

Mailing Address **14814 Hawthorne Boulevard**

City **Lawndale** State **CA** Zip Code **90260**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18016**

Date of Disbursement

**11** / **20** / **2007**

Amount of Each Disbursement this Period

**292.59**

**B.**

Full Name (Last, First, Middle Initial)  
**HOLIDAY INN EXPRESS LAX**

Mailing Address **14814 Hawthorne Boulevard**

City **Lawndale** State **CA** Zip Code **90260**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18142**

Date of Disbursement

**12** / **17** / **2007**

Amount of Each Disbursement this Period

**430.51**

**C.**

Full Name (Last, First, Middle Initial)  
**HOLIDAY INNS-BEVER**

Mailing Address **14814 Hawthorne Boulevard**

City **Lawndale** State **CA** Zip Code **90260**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17856**

Date of Disbursement

**10** / **16** / **2007**

Amount of Each Disbursement this Period

**238.01**

**SUBTOTAL** of Disbursements This Page (optional) .....

**961.11**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 114 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)  
**HOTELSCOM**

Mailing Address **10440 N. Central Expwy  
 Ste. 400**

City **Dallas** State **TX** Zip Code **75231**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17888**

Date of Disbursement

**10** / **23** / **2007**

Amount of Each Disbursement this Period

**291.57**

**B.**

Full Name (Last, First, Middle Initial)  
**Eleonai Israel**

Mailing Address **675 Hennessy Way**

City **Bowling Green** State **KY** Zip Code **42101**

Purpose of Disbursement  
**CONSULTING FEES COMMUNICATIONS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17804**

Date of Disbursement

**10** / **04** / **2007**

Amount of Each Disbursement this Period

**1583.99**

**C.**

Full Name (Last, First, Middle Initial)  
**Eleonai Israel**

Mailing Address **675 Hennessy Way**

City **Bowling Green** State **KY** Zip Code **42101**

Purpose of Disbursement  
**CONSULTING FEES COMMUNICATIONS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17859**

Date of Disbursement

**10** / **17** / **2007**

Amount of Each Disbursement this Period

**2000.00**

**SUBTOTAL** of Disbursements This Page (optional) .....

**3875.56**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 115 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

<b>A.</b> Full Name (Last, First, Middle Initial) Eleonai Israel	<b>Transaction ID:</b> SB23.17947 <b>Date of Disbursement</b>
Mailing Address 675 Hennessy Way	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 2 / 2 0 0 7</div> </div>
City Bowling Green State KY Zip Code 42101	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CONSULTING FEES COMMUNICATIONS	<div> <div></div> <div>1500.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Eleonai Israel	<b>Transaction ID:</b> SB23.18000 <b>Date of Disbursement</b>
Mailing Address 675 Hennessy Way	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 6 / 2 0 0 7</div> </div>
City Bowling Green State KY Zip Code 42101	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CONSULTING FEES COMMUNICATIONS	<div> <div></div> <div>1958.96</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Eleonai Israel	<b>Transaction ID:</b> SB23.18024 <b>Date of Disbursement</b>
Mailing Address 675 Hennessy Way	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 3 / 2 0 0 7</div> </div>
City Bowling Green State KY Zip Code 42101	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement EXPENSE REIMBURSEMENT	<div> <div></div> <div>244.50</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**3703.46**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 116 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)

Eleonai Israel

Mailing Address 675 Hennessy Way

City Bowling Green State KY Zip Code 42101

Purpose of Disbursement  
CONSULTING FEES COMMUNICATIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18076**

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

JET BLUE AIRWAYS CORP

Mailing Address 19 Old Kings Hwy S # 23

City Darien State CT Zip Code 06820

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17878**

Date of Disbursement

10 / 22 / 2007

Amount of Each Disbursement this Period

428.80

**C.**

Full Name (Last, First, Middle Initial)

JET BLUE AIRWAYS CORP

Mailing Address 19 Old Kings Hwy S # 23

City Darien State CT Zip Code 06820

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17889**

Date of Disbursement

10 / 23 / 2007

Amount of Each Disbursement this Period

258.80

**SUBTOTAL** of Disbursements This Page (optional) .....

2187.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 117 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

JET BLUE AIRWAYS CORP

Mailing Address 19 Old Kings Hwy S # 23

City State Zip Code  
Darien CT 06820

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18143

Date of Disbursement

/   /

Amount of Each Disbursement this Period

189.40

**B.**

Full Name (Last, First, Middle Initial)

RODRIGUEZ JOSE

Mailing Address 1435 MONROE ST NW

City State Zip Code  
WASHINGTON DC 20010

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18051

Date of Disbursement

/   /

Amount of Each Disbursement this Period

267.42

**C.**

Full Name (Last, First, Middle Initial)

RODRIGUEZ JOSE

Mailing Address 1435 MONROE ST NW

City State Zip Code  
WASHINGTON DC 20010

Purpose of Disbursement  
CONSULTING CAMPAIGN COORDINATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18052

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1956.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 118 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)  
**RODRIGUEZ JOSE**

Mailing Address **1435 MONROE ST NW**

City **WASHINGTON** State **DC** Zip Code **20010**

Purpose of Disbursement  
**CONSULTING CAMPAIGN COORDINATION**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18053**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**1500.00**

**B.**

Full Name (Last, First, Middle Initial)  
**RODRIGUEZ JOSE**

Mailing Address **1435 MONROE ST NW**

City **WASHINGTON** State **DC** Zip Code **20010**

Purpose of Disbursement  
**CONSULTING CAMPAIGN COORDINATION**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18147**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**1500.00**

**C.**

Full Name (Last, First, Middle Initial)  
**ELEANOR JUSTICE**

Mailing Address **801 CHAUNCEY AVENUE**

City **BALTIMORE** State **MD** Zip Code **21217**

Purpose of Disbursement  
**PRINTING AND STATIONARY**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17957**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**150.00**

**SUBTOTAL** of Disbursements This Page (optional) .....

**3150.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 119 / 194

☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ELEANOR JUSTICE

Mailing Address 801 CHAUNCEY AVENUE

City State Zip Code  
BALTIMORE MD 21217

Purpose of Disbursement  
PRINTING AND STATIONARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17958

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

B.

Full Name (Last, First, Middle Initial)

ELEANOR JUSTICE

Mailing Address 801 CHAUNCEY AVENUE

City State Zip Code  
BALTIMORE MD 21217

Purpose of Disbursement  
PRINTING AND STATIONARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18107

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)

ELEANOR JUSTICE

Mailing Address 801 CHAUNCEY AVENUE

City State Zip Code  
BALTIMORE MD 21217

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18175

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) <b>KG INTERNATIONAL</b>	<b>Transaction ID:</b> SB23.17932 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>10 / 31 / 2007</div> </div>	
Mailing Address     11311 TRENTON CT	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-size: 1.2em;">2000.00</div>	
<div>City <b>BRISTOW</b></div> <div>State <b>VA</b></div> <div>Zip Code <b>20136</b></div>		
<div style="flex: 1;">           Purpose of Disbursement  <b>ACCOUNTING SERVICES</b> </div> <div style="flex: 0.5; border: 1px solid black; text-align: center; font-size: 0.8em;">             Category/ Type           </div>		
Candidate Name		
<div style="flex: 1;">           Office Sought:    <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President            State:             District:         </div> <div style="flex: 1;">           Disbursement For:    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div>		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>KG INTERNATIONAL</b>		<b>Transaction ID:</b> SB23.18038 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>11 / 27 / 2007</div> </div>
Mailing Address     11311 TRENTON CT	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-size: 1.2em;">531.51</div>	
<div>City <b>BRISTOW</b></div> <div>State <b>VA</b></div> <div>Zip Code <b>20136</b></div>		
<div style="flex: 1;">           Purpose of Disbursement  <b>EXPENSE REIMBURSEMENT</b> </div> <div style="flex: 0.5; border: 1px solid black; text-align: center; font-size: 0.8em;">             Category/ Type           </div>		
Candidate Name		
<div style="flex: 1;">           Office Sought:    <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President            State:             District:         </div> <div style="flex: 1;">           Disbursement For:    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div>		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>LIST MARKETING INC</b>		<b>Transaction ID:</b> SB23.17865 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>10 / 18 / 2007</div> </div>
Mailing Address     PO Box 862	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-size: 1.2em;">575.00</div>	
<div>City <b>FISHERSVILLE</b></div> <div>State <b>VA</b></div> <div>Zip Code <b>24457</b></div>		
<div style="flex: 1;">           Purpose of Disbursement  <b>TELEPHONE/INTERNET</b> </div> <div style="flex: 0.5; border: 1px solid black; text-align: center; font-size: 0.8em;">             Category/ Type           </div>		
Candidate Name		
<div style="flex: 1;">           Office Sought:    <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President            State:             District:         </div> <div style="flex: 1;">           Disbursement For:    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div>		
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶		<div style="border: 1px solid black; padding: 5px; text-align: right; font-size: 1.2em;">3106.51</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		<div style="border: 1px solid black; padding: 5px; text-align: right; font-size: 1.2em;"> </div>



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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

**1032.90**

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial)  
MISSOURI DEMOCRATIC STATE CTEE

Mailing Address 208 Madison Street

City State Zip Code  
JEFFERSON CITY MO 65102

Purpose of Disbursement  
BALLOT ACCESS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18017

Date of Disbursement

11 / 20 / 2007

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
NOVA INFORMATION SYSTEMS

Mailing Address One Concourse Pkwy  
Suite 300

City State Zip Code  
Atlanta GA 30328

Purpose of Disbursement  
credit card merchant processing fees

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.16891

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

406.06

**C.** Full Name (Last, First, Middle Initial)  
NOVA INFORMATION SYSTEMS

Mailing Address One Concourse Pkwy  
Suite 300

City State Zip Code  
Atlanta GA 30328

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17939

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

179.92

**SUBTOTAL** of Disbursements This Page (optional) .....

1585.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 123 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

## **A.**

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SYSTEMS

Mailing Address One Concourse Pkwy  
Suite 300

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18064

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

319.85

## **B.**

Full Name (Last, First, Middle Initial)

NOVA INFORMATION SYSTEMS

Mailing Address One Concourse Pkwy  
Suite 300

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
CREDIT CARD MERCHANT PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18065

Date of Disbursement

12 / 03 / 2007

Amount of Each Disbursement this Period

319.85

## **C.**

Full Name (Last, First, Middle Initial)

NWA AIRLINES

Mailing Address 12755 State Highway 55

City Plymouth State MN Zip Code 55441

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17985

Date of Disbursement

11 / 14 / 2007

Amount of Each Disbursement this Period

400.10

**SUBTOTAL** of Disbursements This Page (optional) .....

1039.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 124 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>NWA AIRLINES</b>	<b>Transaction ID: SB23.17992</b> Date of Disbursement																				
Mailing Address 12755 State Highway 55	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	5		2	0	0	7												
City Plymouth State MN Zip Code 55441	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>395.09</td> </tr> </table>																				395.09
									395.09												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) <b>NWA AIRLINES</b>	<b>Transaction ID: SB23.17993</b> Date of Disbursement																				
Mailing Address 12755 State Highway 55	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	5		2	0	0	7												
City Plymouth State MN Zip Code 55441	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>395.09</td> </tr> </table>																				395.09
									395.09												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) <b>NWA AIRLINES</b>	<b>Transaction ID: SB23.17994</b> Date of Disbursement																				
Mailing Address 12755 State Highway 55	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	5		2	0	0	7												
City Plymouth State MN Zip Code 55441	Amount of Each Disbursement this Period																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>395.09</td> </tr> </table>																				395.09
									395.09												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**1185.27**

**TOTAL** This Period (last page this line number only) .....

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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

395.09

-400.10

98.75

FEC Schedule B ( Form 3P)

PAGE 126 / 194

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) <b>OFFICE DEPOT</b>	<b>Transaction ID:</b> SB23.17869 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div><small>1</small> <small>0</small> / <small>1</small> <small>9</small> / <small>2</small> <small>0</small> <small>0</small> <small>7</small></div> </div>
Mailing Address      Sunnyvale Branch	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-size: 1.2em;">1.04</div>
<div style="display: flex; justify-content: space-between;"> <div>City Sunnyvale</div> <div>State CA</div> <div>Zip Code 94089</div> </div>	
Purpose of Disbursement PRINTING AND STATIONARY	
Candidate Name	
<div style="display: flex; justify-content: space-between;"> <div>           Office Sought:    <input type="checkbox"/> House                                  <input type="checkbox"/> Senate                                  <input type="checkbox"/> President            State:             District:         </div> <div>           Disbursement For:    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div>	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>OFFICE DEPOT</b>	<b>Transaction ID:</b> SB23.17879 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div><small>1</small> <small>0</small> / <small>2</small> <small>2</small> / <small>2</small> <small>0</small> <small>0</small> <small>7</small></div> </div>
Mailing Address      Sunnyvale Branch	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-size: 1.2em;">90.31</div>
<div style="display: flex; justify-content: space-between;"> <div>City Sunnyvale</div> <div>State CA</div> <div>Zip Code 94089</div> </div>	
Purpose of Disbursement PRINTING AND STATIONARY	
Candidate Name	
<div style="display: flex; justify-content: space-between;"> <div>           Office Sought:    <input type="checkbox"/> House                                  <input type="checkbox"/> Senate                                  <input type="checkbox"/> President            State:             District:         </div> <div>           Disbursement For:    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div>	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>OFFICE OF LT GENERAL UTAH</b>	<b>Transaction ID:</b> SB23.17870 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div><small>1</small> <small>0</small> / <small>1</small> <small>9</small> / <small>2</small> <small>0</small> <small>0</small> <small>7</small></div> </div>
Mailing Address      State Capitol, Suite 220	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-size: 1.2em;">500.00</div>
<div style="display: flex; justify-content: space-between;"> <div>City SALT LAKE CITY</div> <div>State UT</div> <div>Zip Code 84114</div> </div>	
Purpose of Disbursement BALLOT ACCESS UTAH	
Candidate Name	
<div style="display: flex; justify-content: space-between;"> <div>           Office Sought:    <input type="checkbox"/> House                                  <input type="checkbox"/> Senate                                  <input type="checkbox"/> President            State:             District:         </div> <div>           Disbursement For:    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div>	
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 127 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ORLANDO VISTA HOTEL

Mailing Address 12490 Apopka Vineland Road

City ORLANDO State FL Zip Code 32836

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.17918

Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

114.52

B.

Full Name (Last, First, Middle Initial)

Paypal Inc

Mailing Address 7615 37th Ave

City Jackson Heights State NY Zip Code 11372

Purpose of Disbursement  
PAYPAL PROCESSING FEES

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.18191

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

423.00

C.

Full Name (Last, First, Middle Initial)

CHRIS PETHRICK

Mailing Address 16305 WOODVILLE ROAD

City BRANDYWINE State MD Zip Code 20613

Purpose of Disbursement  
CONSULTING FEE CAMPAIGN MAGT

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.16955

Date of Disbursement

10 / 03 / 2007

Amount of Each Disbursement this Period

3729.00

SUBTOTAL of Disbursements This Page (optional) .....

4266.52

TOTAL This Period (last page this line number only) .....

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

FEC Schedule B ( Form 3P)



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 129 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Puritan Backroom Restaurant

Mailing Address 245 Hookset Rd

City  
Manchestor

State  
NH

Zip Code  
03104

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.18161

Date of Disbursement

/   /

Amount of Each Disbursement this Period

22.55

**B.**

Full Name (Last, First, Middle Initial)

ROB RYAN LLC

Mailing Address 2654 W HORIZON RIDGE PARKWAY  
#B5-141

City  
HENDERSON

State  
NV

Zip Code  
89052

Purpose of Disbursement  
PART OF DEBT PAYMENT

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.18186

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

APRIL SHARPLEY

Mailing Address 3801 TATTERSHALL LANE

City  
AUSTIN

State  
TX

Zip Code  
78727

Purpose of Disbursement  
CONSULTING CAMPAIGN COORDINATION

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.18203

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7522.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 130 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

APRIL SHARPLEY

Mailing Address 3801 TATTERSHALL LANE

City State Zip Code  
AUSTIN TX 78727

Purpose of Disbursement  
CONSULTING - CAMPAIGN COORDINATION

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17943

Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

APRIL SHARPLEY

Mailing Address 3801 TATTERSHALL LANE

City State Zip Code  
AUSTIN TX 78727

Purpose of Disbursement  
CONSULTING - CAMPAIGN COORDINATION

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18116

Date of Disbursement

12 / 11 / 2007

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

SHERATON OHARE

Mailing Address 6501 North Mannheim Road

City State Zip Code  
ROSEMONT IL 60018

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18113

Date of Disbursement

12 / 10 / 2007

Amount of Each Disbursement this Period

445.82

**SUBTOTAL** of Disbursements This Page (optional) .....

5445.82

**TOTAL** This Period (last page this line number only) .....

PAGE 131 / 194

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

431.00

**B.**

2500.00

**C.**

122.90

**3053.90**

FEC Schedule B ( Form 3P)

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

97.40

106.40

121.40

FE1AN060.PDF

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 133 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	<b>Transaction ID:</b> SB23.17815 <b>Date of Disbursement</b>																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	9		2	0	0	7												
City Lake Havasu City      State AZ      Zip Code 86403	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>134.40</td> </tr> </table>																				134.40
									134.40												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	<b>Transaction ID:</b> SB23.17828 <b>Date of Disbursement</b>																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	7												
City Lake Havasu City      State AZ      Zip Code 86403	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>91.90</td> </tr> </table>																				91.90
									91.90												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES	<b>Transaction ID:</b> SB23.17829 <b>Date of Disbursement</b>																				
Mailing Address 156 Mescal Loop	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	7												
City Lake Havasu City      State AZ      Zip Code 86403	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement TRAVEL EXPENSES	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>124.90</td> </tr> </table>																				124.90
									124.90												
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**351.20**

**TOTAL** This Period (last page this line number only) .....

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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

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PAGE 135 / 194

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

FE1AN060.PDF

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 136 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address 156 Mescal Loop

City Lake Havasu City State AZ Zip Code 86403

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17919

Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

163.40

**B.**

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address 156 Mescal Loop

City Lake Havasu City State AZ Zip Code 86403

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17920

Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

199.40

**C.**

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address 156 Mescal Loop

City Lake Havasu City State AZ Zip Code 86403

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17940

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

90.40

**SUBTOTAL** of Disbursements This Page (optional) .....

453.20

**TOTAL** This Period (last page this line number only) .....



PAGE 137 / 194

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

State:  District:

Three digital displays showing the date 11/13/2007 in MM/DD/YYYY format. The first display shows '11' with 'M' above each digit. The second display shows '13' with 'D' above each digit. The third display shows '2007' with 'Y' above each digit. The displays are separated by slashes.

State:  District:

State:  District:

**100.90**

FEC Schedule B ( Form 3P)



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 139 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address 156 Mescal Loop

City Lake Havasu City State AZ Zip Code 86403

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18125

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

106.40

B.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address 156 Mescal Loop

City Lake Havasu City State AZ Zip Code 86403

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18126

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

97.40

C.

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address 156 Mescal Loop

City Lake Havasu City State AZ Zip Code 86403

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18134

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

95.90

SUBTOTAL of Disbursements This Page (optional) .....

299.70

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3P)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 140 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Transaction ID: SB23.18213

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	0	7

Mailing Address 156 Mescal Loop

Amount of Each Disbursement this Period

-106.40
---------

City Lake Havasu City State AZ Zip Code 86403

Purpose of Disbursement  
AIRLINE TICKET REFUND

101

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Transaction ID: SB23.18214

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	0	7

Mailing Address 156 Mescal Loop

Amount of Each Disbursement this Period

-95.90
--------

City Lake Havasu City State AZ Zip Code 86403

Purpose of Disbursement  
AIRLINE TICKET REFUND

101

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)

MCNEIL SPENCER

Transaction ID: SB23.17909

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	0	7

Mailing Address 10 WALNUT HILL PARK

Amount of Each Disbursement this Period

2000.00
---------

City Wooburn State MA Zip Code 01801

Purpose of Disbursement  
CONSULTING FEE FUNDRAISINGCategory/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

1797.70

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 141 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)

**SPIRIT AIR**

Mailing Address **2800 Executive Way**

City **MIRAMAR** State **FL** Zip Code **33025**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17923**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**278.80**

**B.**

Full Name (Last, First, Middle Initial)

**Staples**

Mailing Address **910 North Glebe Road**

City **Arlington** State **VA** Zip Code **22203**

Purpose of Disbursement  
**PRINTING AND STATIONARY**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17849**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**150.46**

**C.**

Full Name (Last, First, Middle Initial)

**Staples**

Mailing Address **910 North Glebe Road**

City **Arlington** State **VA** Zip Code **22203**

Purpose of Disbursement  
**PRINTING AND STATIONARY**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17967**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**88.99**

**SUBTOTAL** of Disbursements This Page (optional) .....

**518.25**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 142 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 910 North Glebe Road

City State Zip Code  
Arlington VA 22203

Purpose of Disbursement  
PRINTING AND STATIONARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.18170

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.37

**B.**

Full Name (Last, First, Middle Initial)

STATE OF NEW HAMPSHIRE

Mailing Address State House, Room 204

City State Zip Code  
CONCORD NH 03301

Purpose of Disbursement  
BALLOT ACCESS NH

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.17962

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

ST MARKS CHURCH

Mailing Address 131 E 10th St at Second Ave

City State Zip Code  
EAST VILLAGE IA 50126

Purpose of Disbursement  
CONFERENCE RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.17930

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1420.37

**TOTAL** This Period (last page this line number only) .....

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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

FE1AN060.PDF

PAGE 144 / 194

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

163.50

313.04

3000.00

**3476.54**

FEC Schedule B ( Form 3P)



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 145 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)  
**THE DEMOCRATIC PARTY OF ARKANSAS**

Mailing Address **1300 W CAPITOL AVE**

City **LITTLE ROCK** State **AR** Zip Code **72201**

Purpose of Disbursement  
**BALLOT ACCESS**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18018**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**2500.00**

**B.**

Full Name (Last, First, Middle Initial)  
**Travel City**

Mailing Address **1712 N Frazier St**

City **Conroe** State **TX** Zip Code **77301**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18177**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**6.00**

**C.**

Full Name (Last, First, Middle Initial)  
**TROY ASSOCIATES**

Mailing Address **1916 Wilson Boulevard**

City **Arlington,** State **VA** Zip Code **22201**

Purpose of Disbursement  
**RENTAL HEADQUARTERS**

Candidate Name

**101**  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.16956**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**2982.33**

**SUBTOTAL** of Disbursements This Page (optional) .....

**5488.33**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 146 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

TROY ASSOCIATES

Mailing Address 1916 Wilson Boulevard

City State Zip Code  
Arlington, VA 22201

Purpose of Disbursement  
RENTAL HQT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17971

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2982.33

**B.**

Full Name (Last, First, Middle Initial)

TROY ASSOCIATES

Mailing Address 1916 Wilson Boulevard

City State Zip Code  
Arlington, VA 22201

Purpose of Disbursement  
RENTAL HQT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18119

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2982.33

**C.**

Full Name (Last, First, Middle Initial)

UNITED AIR

Mailing Address 1 United Sales Center

City State Zip Code  
CHICAGO IL 60666

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17831

Date of Disbursement

/   /

Amount of Each Disbursement this Period

774.81

**SUBTOTAL** of Disbursements This Page (optional) .....

6739.47

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 147 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

UNITED AIR

Mailing Address 1 United Sales Center

City  
CHICAGO

State  
IL

Zip Code  
60666

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.18079

Date of Disbursement

/   /

Amount of Each Disbursement this Period

525.79

**B.**

Full Name (Last, First, Middle Initial)

UNITED AIR

Mailing Address 1 United Sales Center

City  
CHICAGO

State  
IL

Zip Code  
60666

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.18080

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

UNITED AIR

Mailing Address 1 United Sales Center

City  
CHICAGO

State  
IL

Zip Code  
60666

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.18168

Date of Disbursement

/   /

Amount of Each Disbursement this Period

476.10

**SUBTOTAL** of Disbursements This Page (optional) .....

1021.89

**TOTAL** This Period (last page this line number only) .....

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

FEC Schedule B ( Form 3P)

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)

**US AIRWAYS**

Mailing Address **2345 CRYSTAL DVE**

City **ARLINGTON** State **VA** Zip Code **22227**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18055**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**625.30**

**B.**

Full Name (Last, First, Middle Initial)

**US AIRWAYS**

Mailing Address **2345 CRYSTAL DVE**

City **ARLINGTON** State **VA** Zip Code **22227**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18068**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**100.00**

**C.**

Full Name (Last, First, Middle Initial)

**US AIRWAYS**

Mailing Address **2345 CRYSTAL DVE**

City **ARLINGTON** State **VA** Zip Code **22227**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18069**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**100.00**

**SUBTOTAL** of Disbursements This Page (optional) .....

**825.30**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)  
**US CELLUAR**

Mailing Address **288 ROUTE 101, 1. ST. FLOOR**

City **BEDFORD** State **NH** Zip Code **03110**

Purpose of Disbursement  
**TELEPHONE/INTERNET**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18070**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**293.63**

**B.**

Full Name (Last, First, Middle Initial)  
**US CELLUAR**

Mailing Address **288 ROUTE 101, 1. ST. FLOOR**

City **BEDFORD** State **NH** Zip Code **03110**

Purpose of Disbursement  
**TELEPHONE/INTERNET**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18071**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**293.63**

**C.**

Full Name (Last, First, Middle Initial)  
**USPOST ARLINGTON**

Mailing Address **1101 Wilson Blvd Arlington,**

City **ARLINGTON** State **VA** Zip Code **22201**

Purpose of Disbursement  
**POSTAGE**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.18179**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**15.39**

**SUBTOTAL** of Disbursements This Page (optional) .....

**602.65**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

VERIZON WIRELESS

Mailing Address 4238 Wilson Blvd

City  
Arlington

State  
VA

Zip Code  
22203

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17871

Date of Disbursement

10 / 19 / 2007

Amount of Each Disbursement this Period

187.77

B.

Full Name (Last, First, Middle Initial)

VERIZON WIRELESS

Mailing Address 4238 Wilson Blvd

City  
Arlington

State  
VA

Zip Code  
22203

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17933

Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

703.50

C.

Full Name (Last, First, Middle Initial)

VERIZON WIRELESS

Mailing Address 4238 Wilson Blvd

City  
Arlington

State  
VA

Zip Code  
22203

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17941

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

488.98

SUBTOTAL of Disbursements This Page (optional) .....

1380.25

TOTAL This Period (last page this line number only) .....



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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

12 / 07 / 2007

Category/ Type	Count
Category 1	10
Category 2	20
Category 3	30
Category 4	40
Category 5	50
Category 6	60
Category 7	70
Category 8	80
Category 9	90
Category 10	100
Category 11	110
Category 12	120
Category 13	130
Category 14	140
Category 15	150
Category 16	160
Category 17	170
Category 18	180
Category 19	190
Category 20	200
Category 21	210
Category 22	220
Category 23	230
Category 24	240
Category 25	250
Category 26	260
Category 27	270
Category 28	280
Category 29	290
Category 30	300
Category 31	310
Category 32	320
Category 33	330
Category 34	340
Category 35	350
Category 36	360
Category 37	370
Category 38	380
Category 39	390
Category 40	400
Category 41	410
Category 42	420
Category 43	430
Category 44	440
Category 45	450
Category 46	460
Category 47	470
Category 48	480
Category 49	490
Category 50	500
Category 51	510
Category 52	520
Category 53	530
Category 54	540
Category 55	550
Category 56	560
Category 57	570
Category 58	580
Category 59	590
Category 60	600
Category 61	610
Category 62	620
Category 63	630
Category 64	640
Category 65	650
Category 66	660
Category 67	670
Category 68	680
Category 69	690
Category 70	700
Category 71	710
Category 72	720
Category 73	730
Category 74	740
Category 75	750
Category 76	760
Category 77	770
Category 78	780
Category 79	790
Category 80	800
Category 81	810
Category 82	820
Category 83	830
Category 84	840
Category 85	850
Category 86	860
Category 87	870
Category 88	880
Category 89	890
Category 90	900
Category 91	910
Category 92	920
Category 93	930
Category 94	940
Category 95	950
Category 96	960
Category 97	970
Category 98	980
Category 99	990
Category 100	1000

Disbursement For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Category/ Type	Count	Percentage
Category 1	10	10.0%
Category 2	20	20.0%
Category 3	30	30.0%
Category 4	40	40.0%
Category 5	50	50.0%
Category 6	60	60.0%
Category 7	70	70.0%
Category 8	80	80.0%
Category 9	90	90.0%
Category 10	100	100.0%

Disbursement For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

**C.**

Category/  
Type

Disbursement For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

**221.68**

FEC Schedule B ( Form 3P)

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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) <b>VONAGE USA</b>	<b>Transaction ID:</b> SB23.17818 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>10 / 09 / 2007</div> </div>
Mailing Address      23 Main St.	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-size: 1.2em;">58.77</div>
<div>City Holmdel</div> <div>State NJ</div> <div>Zip Code 07733</div>	
<div style="flex: 1;">         Purpose of Disbursement          TELEPHONE/INTERNET       </div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
<div style="flex: 1;">Candidate Name</div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State:              District:	Disbursement For:      2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) <b>VONAGE USA</b>	
Mailing Address      23 Main St.	<b>Transaction ID:</b> SB23.17925 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>10 / 29 / 2007</div> </div>
City Holmdel	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-size: 1.2em;">58.72</div>
<div>State NJ</div> <div>Zip Code 07733</div>	
<div style="flex: 1;">         Purpose of Disbursement          TELEPHONE/INTERNET       </div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
<div style="flex: 1;">Candidate Name</div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State:              District:	Disbursement For:      2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) <b>VONAGE USA</b>	
Mailing Address      23 Main St.	<b>Transaction ID:</b> SB23.17982 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>11 / 13 / 2007</div> </div>
City Holmdel	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-size: 1.2em;">59.22</div>
<div>State NJ</div> <div>Zip Code 07733</div>	
<div style="flex: 1;">         Purpose of Disbursement          TELEPHONE/INTERNET       </div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
<div style="flex: 1;">Candidate Name</div> <div style="flex: 0.5; border: 1px solid black; width: 50px; height: 30px; margin-left: 10px;"></div>	
Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  State:              District:	Disbursement For:      2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

176.71

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 155 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

VONAGE USA

Mailing Address 23 Main St.

City State Zip Code  
Holmdel NJ 07733

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18033

Date of Disbursement

/   /

Amount of Each Disbursement this Period

54.46

**B.**

Full Name (Last, First, Middle Initial)

VONAGE USA

Mailing Address 23 Main St.

City State Zip Code  
Holmdel NJ 07733

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18114

Date of Disbursement

/   /

Amount of Each Disbursement this Period

59.22

**C.**

Full Name (Last, First, Middle Initial)

VONAGE USA

Mailing Address 23 Main St.

City State Zip Code  
Holmdel NJ 07733

Purpose of Disbursement  
TELEPHONE/INTERNET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18164

Date of Disbursement

/   /

Amount of Each Disbursement this Period

51.11

**SUBTOTAL** of Disbursements This Page (optional) .....

164.79

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City  
Charlotte

State  
NC

Zip Code  
28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

101  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.16899

Date of Disbursement

10 / 02 / 2007

Amount of Each Disbursement this Period

214.04

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City  
Charlotte

State  
NC

Zip Code  
28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17820

Date of Disbursement

10 / 10 / 2007

Amount of Each Disbursement this Period

38.50

C.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City  
Charlotte

State  
NC

Zip Code  
28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.17934

Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

71.16

SUBTOTAL of Disbursements This Page (optional) .....

323.70

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>Wachovia Bank</b></p> <p>Mailing Address <b>P.O. Box 563966</b></p> <p>City <b>Charlotte</b> State <b>NC</b> Zip Code <b>28262</b></p> <p>Purpose of Disbursement  <b>BANK CHARGES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.17952</b>          Date of Disbursement          M M / D D / Y Y Y Y  <b>1 1 / 0 2 / 2 0 0 7</b></p> <p>Amount of Each Disbursement this Period  <b>1381.56</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>Wachovia Bank</b></p> <p>Mailing Address <b>P.O. Box 563966</b></p> <p>City <b>Charlotte</b> State <b>NC</b> Zip Code <b>28262</b></p> <p>Purpose of Disbursement  <b>BANK CHARGES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.17972</b>          Date of Disbursement          M M / D D / Y Y Y Y  <b>1 1 / 0 8 / 2 0 0 7</b></p> <p>Amount of Each Disbursement this Period  <b>70.00</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>Wachovia Bank</b></p> <p>Mailing Address <b>P.O. Box 563966</b></p> <p>City <b>Charlotte</b> State <b>NC</b> Zip Code <b>28262</b></p> <p>Purpose of Disbursement  <b>BANK CHARGES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.17975</b>          Date of Disbursement          M M / D D / Y Y Y Y  <b>1 1 / 0 9 / 2 0 0 7</b></p> <p>Amount of Each Disbursement this Period  <b>3.00</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1454.56**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 158 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>Wachovia Bank</b></p> <p>Mailing Address <b>P.O. Box 563966</b></p> <p>City <b>Charlotte</b> State <b>NC</b> Zip Code <b>28262</b></p> <p>Purpose of Disbursement  <b>BANK CHARGES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.17988</b>          Date of Disbursement          11 / 14 / 2007</p> <p>Amount of Each Disbursement this Period          10.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>Wachovia Bank</b></p> <p>Mailing Address <b>P.O. Box 563966</b></p> <p>City <b>Charlotte</b> State <b>NC</b> Zip Code <b>28262</b></p> <p>Purpose of Disbursement  <b>BANK CHARGES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.18013</b>          Date of Disbursement          11 / 19 / 2007</p> <p>Amount of Each Disbursement this Period          10.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>Wachovia Bank</b></p> <p>Mailing Address <b>P.O. Box 563966</b></p> <p>City <b>Charlotte</b> State <b>NC</b> Zip Code <b>28262</b></p> <p>Purpose of Disbursement  <b>BANK CHARGES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.18020</b>          Date of Disbursement          11 / 21 / 2007</p> <p>Amount of Each Disbursement this Period          5.00</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**25.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a  
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City State Zip Code  
Charlotte NC 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18034

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1.80

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City State Zip Code  
Charlotte NC 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18035

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City State Zip Code  
Charlotte NC 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18039

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.00

**SUBTOTAL** of Disbursements This Page (optional) .....

21.80

**TOTAL** This Period (last page this line number only) .....

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

FEC Schedule B ( Form 3P)



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 161 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18044

Date of Disbursement

11 / 28 / 2007

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18056

Date of Disbursement

11 / 30 / 2007

Amount of Each Disbursement this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18057

Date of Disbursement

11 / 30 / 2007

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) Wachovia Bank	<b>Transaction ID:</b> SB23.18072 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 0 3 / 2 0 0 7</div> </div>
Mailing Address      P.O. Box 563966	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-weight: bold;">10.00</div>
<div style="display: flex; justify-content: space-between;"> <span>City Charlotte</span> <span>State NC</span> <span>Zip Code 28262</span> </div>	
Purpose of Disbursement BANK CHARGES	
Candidate Name	
<div style="display: flex; justify-content: space-between;"> <div>           Office Sought:    <input type="checkbox"/> House                                  <input type="checkbox"/> Senate                                  <input type="checkbox"/> President            State:             District:         </div> <div>           Disbursement For:    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div>	
<b>B.</b> Full Name (Last, First, Middle Initial) Wachovia Bank	
Mailing Address      P.O. Box 563966	<b>Transaction ID:</b> SB23.18073 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 0 3 / 2 0 0 7</div> </div>
<div style="display: flex; justify-content: space-between;"> <span>City Charlotte</span> <span>State NC</span> <span>Zip Code 28262</span> </div>	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-weight: bold;">10.00</div>
Purpose of Disbursement BANK CHARGES	
Candidate Name	
<div style="display: flex; justify-content: space-between;"> <div>           Office Sought:    <input type="checkbox"/> House                                  <input type="checkbox"/> Senate                                  <input type="checkbox"/> President            State:             District:         </div> <div>           Disbursement For:    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div>	
Full Name (Last, First, Middle Initial) Wachovia Bank	
Mailing Address      P.O. Box 563966	<b>Transaction ID:</b> SB23.18081 <b>Date of Disbursement</b> <div style="display: flex; justify-content: space-around;"> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 0 4 / 2 0 0 7</div> </div>
<div style="display: flex; justify-content: space-between;"> <span>City Charlotte</span> <span>State NC</span> <span>Zip Code 28262</span> </div>	<b>Amount of Each Disbursement this Period</b> <div style="border: 1px solid black; padding: 5px; text-align: right; font-weight: bold;">1419.56</div>
Purpose of Disbursement BANK CHARGES	
Candidate Name	
<div style="display: flex; justify-content: space-between;"> <div>           Office Sought:    <input type="checkbox"/> House                                  <input type="checkbox"/> Senate                                  <input type="checkbox"/> President            State:             District:         </div> <div>           Disbursement For:    2008  <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </div> </div>	
Full Name (Last, First, Middle Initial) Wachovia Bank	
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 163 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18088

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18089

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18090

Date of Disbursement

12 / 05 / 2007

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

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X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

FE1AN060.PDF

PAGE 165 / 194

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

FE1AN060.PDF

X	23		24		25		26		27a
	27b		28a		28b		28c		29

MIKE GRAVEL FOR PRESIDENT 2008

51.88

45.00

10.00

FEC Schedule B ( Form 3P)

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 167 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18135

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18136

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address P.O. Box 563966

City Charlotte State NC Zip Code 28262

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.18137

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional) .....

30.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 168 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>Wachovia Bank</b></p> <p>Mailing Address <b>P.O. Box 563966</b></p> <p>City <b>Charlotte</b> State <b>NC</b> Zip Code <b>28262</b></p> <p>Purpose of Disbursement  <b>BANK CHARGES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.18146</b>          Date of Disbursement          12 / 17 / 2007</p> <p>Amount of Each Disbursement this Period          10.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>Wachovia Bank</b></p> <p>Mailing Address <b>P.O. Box 563966</b></p> <p>City <b>Charlotte</b> State <b>NC</b> Zip Code <b>28262</b></p> <p>Purpose of Disbursement  <b>BANK CHARGES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.18155</b>          Date of Disbursement          12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period          10.35</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)  <b>Wachovia Bank</b></p> <p>Mailing Address <b>P.O. Box 563966</b></p> <p>City <b>Charlotte</b> State <b>NC</b> Zip Code <b>28262</b></p> <p>Purpose of Disbursement  <b>BANK CHARGES</b></p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2008  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID: SB23.18171</b>          Date of Disbursement          12 / 28 / 2007</p> <p>Amount of Each Disbursement this Period          10.00</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**30.35**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
**MIKE GRAVEL FOR PRESIDENT 2008**

**A.**

Full Name (Last, First, Middle Initial)

**WORLD CAFE LIVE**

Mailing Address **3025 Walnut Street**

City **Philadelphia** State **PA** Zip Code **19104**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17936**

Date of Disbursement

**10** / **31** / **2007**

Amount of Each Disbursement this Period

**10500.00**

**B.**

Full Name (Last, First, Middle Initial)

**WORLD CAFE LIVE**

Mailing Address **3025 Walnut Street**

City **Philadelphia** State **PA** Zip Code **19104**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17942**

Date of Disbursement

**11** / **01** / **2007**

Amount of Each Disbursement this Period

**117.40**

**C.**

Full Name (Last, First, Middle Initial)

**ZORGO PRINTING SERVICE INC**

Mailing Address **131 North Main Street**

City **Pittston** State **PA** Zip Code **18640**

Purpose of Disbursement  
**PRINTING AND STATIONARY**

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: **2008**  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.17821**

Date of Disbursement

**10** / **10** / **2007**

Amount of Each Disbursement this Period

**1436.25**

**SUBTOTAL** of Disbursements This Page (optional) .....

**12053.65**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 170 / 194

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

A.

Full Name (Last, First, Middle Initial)

ZORGO PRINTING SERVICE INC

Mailing Address 131 North Main Street

City  
Pittston

State  
PA

Zip Code  
18640

Purpose of Disbursement  
PRINTING AND STATIONARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.17969

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1729.00

SUBTOTAL of Disbursements This Page (optional) .....

1729.00

TOTAL This Period (last page this line number only) .....

146328.84

# **SCHEDULE B (FEC Form 3P)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 171 / 194

<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input checked="" type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.**

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement  
LOAN REPAYMENT

Candidate Name  
MIKE GRAVEL

Office Sought: ☐ House  
☐ Senate  
☒ President  
 State: District: 00

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

101  
Category/  
Type

Transaction ID: SB27A.18184

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement  
LOAN REPAYMENT

Candidate Name  
MIKE GRAVEL

Office Sought: ☐ House  
☐ Senate  
☒ President  
 State: District: 00

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

101  
Category/  
Type

Transaction ID: SB27A.18185

Date of Disbursement

12 / 24 / 2007

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

10000.00

**TOTAL** This Period (last page this line number only) ..... ►

10000.00

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4621

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

30000.00

Cumulative Payment To Date

20900.00

Balance Outstanding at Close of This Period

9100.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 7D D  
2 4Y Y Y Y  
2 0 0 6

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

9100.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 173 / 194

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4629

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 7D D  
2 4Y Y Y Y  
2 0 0 6

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

3000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 174 / 194

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4622

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 9D D  
2 7Y Y Y Y  
2 0 0 6

12/31/2006

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

15000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4623

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 9D D  
2 7Y Y Y Y  
2 0 0 6

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

100.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4726

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 0D D  
2 5Y Y Y Y  
2 0 0 6

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

5000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4743

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON

State VA

ZIP Code 22209

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 1D D  
3 0Y Y Y Y  
2 0 0 6

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

6000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 178 / 194

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.4744

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 2D D  
1 8Y Y Y Y  
2 0 0 6

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

5000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 179 / 194

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5215

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

806.74

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

806.74

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
0 7Y Y Y Y  
2 0 0 7

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

806.74

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 180 / 194

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5217

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

181.87

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

181.87

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
0 7Y Y Y Y  
2 0 0 7

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

181.87

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 181 / 194

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5220

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

95.70

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

95.70

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 3Y Y Y Y  
2 0 0 7

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

95.70

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 182 / 194

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5216

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 5Y Y Y Y  
2 0 0 7

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1500.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 183 / 194

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5219

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON

State VA

ZIP Code 22209

Original Amount of Loan

43.59

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

43.59

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 6Y Y Y Y  
2 0 0 7

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

43.59

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 184 / 194

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5221

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON

State VA

ZIP Code 22209

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 2D D  
2 8Y Y Y Y  
2 0 0 7

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

1000.00

**TOTALS** This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3P)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 185 / 194

FOR LINE NUMBER:  
(check only one)☒ 19a  
☐ 19b

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

Transaction ID: SC/12.5218

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

MIKE GRAVEL

Election:

☒ Primary  
☐ General  
☐ Other (specify) ▼

Mailing Address 1600 NO OAK ST APT 1412

City ARLINGTON State VA ZIP Code 22209

Original Amount of Loan

787.83

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

787.83

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 3D D  
0 8Y Y Y Y  
2 0 0 7

12/31/2008

0 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

787.83

**TOTALS** This Period (last page in this line only) ▶

47615.73

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 186 / 194

FOR LINE NUMBER:  
(check only one)☒ 11  
☐ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AUBURN QUAD, INC.Nature of Debt (Purpose):  
OUTSTANDING CHECK FOR DON-  
ATIONS

Mailing Address P.O. BOX 390728

City State ZIP Code  
CAMBRIDGE MA 02139

Outstanding Balance Beginning This Period

898.02

Transaction ID: SD11.13441

Amount Incurred This Period

0.00

Payment This Period

898.02

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AUTHORIZENET CORPNature of Debt (Purpose):  
UNSETTLED FUNDSMailing Address 915 SOUTH 500 EAST  
SUITE 200City State ZIP Code  
AMERICAN FORK UT 84003

Outstanding Balance Beginning This Period

7411.30

Transaction ID: SD11.13440

Amount Incurred This Period

0.00

Payment This Period

7411.30

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AUTHORIZENET CORPNature of Debt (Purpose):  
donations not depositedMailing Address 915 SOUTH 500 EAST  
SUITE 200City State ZIP Code  
AMERICAN FORK UT 84003

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD11.18240

Amount Incurred This Period

4932.70

Payment This Period

0.00

Outstanding Balance at Close of This Period

4932.70

1) **SUBTOTALS** This Period This Page (optional).....

4932.70

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 187 / 194

FOR LINE NUMBER:  
(check only one)☒ 11  
☐ 12NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Paypal IncNature of Debt (Purpose):  
UNSETTLED DONATIONS

Mailing Address 7615 37th Ave

City State ZIP Code  
Jackson Heights NY 11372

Outstanding Balance Beginning This Period

1066.66

Transaction ID: SD11.13439

Amount Incurred This Period

0.00

Payment This Period

1066.66

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Paypal IncNature of Debt (Purpose):  
donations not deposited

Mailing Address 7615 37th Ave

City State ZIP Code  
Jackson Heights NY 11372

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD11.18239

Amount Incurred This Period

852.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

852.00

1) **SUBTOTALS** This Period This Page (optional).....

852.00

2) **TOTALS** This Period (last page this line number only).....

5784.70

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

5784.70

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 188 / 194

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 WHITNEY GRAVEL

 Nature of Debt (Purpose):  
 EXPENSE REIMBURSEMENT

Mailing Address 1600 N. OAK ST

City	State	ZIP Code
ARLINGTON	VA	22209

Outstanding Balance Beginning This Period

193.32

Transaction ID: SD12.13421

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

193.32

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Augustine Gyamfi

 Nature of Debt (Purpose):  
 EXPENSE REIMBURSEMENT

Mailing Address 11311 Trenton Ct

City	State	ZIP Code
Bristow	VA	20136

Outstanding Balance Beginning This Period

24.00

Transaction ID: SD12.13461

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 ELLIOT JACOBSON

 Nature of Debt (Purpose):  
 CONSULTING FEE - FUNDRAIS-  
 ING
Mailing Address 1101 3RD STREET, SW  
APT201

City	State	ZIP Code
WASHINGTON	DC	20021

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.13422

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

1) **SUBTOTALS** This Period This Page (optional).....

3217.32

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 189 / 194

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KG INTERNATIONALNature of Debt (Purpose):  
ACCOUNTING CONSULTING

Mailing Address 11311 TRENTON CT

City State ZIP Code  
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18205

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
KG INTERNATIONALNature of Debt (Purpose):  
ACCOUNTING CONSULTING

Mailing Address 11311 TRENTON CT

City State ZIP Code  
BRISTOW VA 20136

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18206

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
NETWORK GUILD LLCNature of Debt (Purpose):  
CONSULTING WEBSITE DEVELOPMENT

Mailing Address 1068 TREVINO LN

City State ZIP Code  
HENDON VA 20170

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18207

Amount Incurred This Period

10000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

**1) SUBTOTALS** This Period This Page (optional).....

15000.00

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 190 / 194

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ELLEN REYNOLDSNature of Debt (Purpose):  
NEW HAMPSHIRE OFFICE RENT-  
AL

Mailing Address 7 ROBINSON LANE

City State ZIP Code  
MOUNT PRESENT ME 04660

Outstanding Balance Beginning This Period

4000.00

Transaction ID: SD12.13424

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ROB RYAN LLCNature of Debt (Purpose):  
WEBSITE REDESIGNMailing Address 2654 W HORIZON RIDGE PARKWAY  
#B5-141City State ZIP Code  
HENDERSON NV 89052

Outstanding Balance Beginning This Period

15000.00

Transaction ID: SD12.13419

Amount Incurred This Period

0.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

10000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ROB RYAN LLCNature of Debt (Purpose):  
FUND RAISING FEESMailing Address 2654 W HORIZON RIDGE PARKWAY  
#B5-141City State ZIP Code  
HENDERSON NV 89052

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18197

Amount Incurred This Period

12900.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12900.00

1) **SUBTOTALS** This Period This Page (optional).....

26900.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 191 / 194

FOR LINE NUMBER:  
(check only one)
☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ROB RYAN LLC

Nature of Debt (Purpose):  
CONSULTING FUND RAISING

Mailing Address 2654 W HORIZON RIDGE PARKWAY  
#B5-141

City State ZIP Code  
HENDERSON NV 89052

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18198

Amount Incurred This Period

7312.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

7312.50

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
APRIL SHARPLEY

Nature of Debt (Purpose):  
CONSULTING FEES CAMPAIGN  
COORDINATION

Mailing Address 3801 TATTERSHALL LANE

City State ZIP Code  
AUSTIN TX 78727

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD12.13423

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
APRIL SHARPLEY

Nature of Debt (Purpose):  
CONSULTING CAMPAIGN COORD-  
INATION

Mailing Address 3801 TATTERSHALL LANE

City State ZIP Code  
AUSTIN TX 78727

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18204

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

9812.50

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 192 / 194

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12

NAME OF COMMITTEE (In Full)

MIKE GRAVEL FOR PRESIDENT 2008

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TELENOMICS GROUPNature of Debt (Purpose):  
CONSULTING DATABASE MAGT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code  
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD12.13420

Amount Incurred This Period

0.00

Payment This Period

3000.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TELENOMICS GROUPNature of Debt (Purpose):  
CONSULTING DATABASE MANAG-  
EMENT

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code  
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18200

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TELENOMICS GROUPNature of Debt (Purpose):  
DATABASE MANAGEMENT CONSU-  
LTING

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code  
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18201

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

**1) SUBTOTALS** This Period This Page (optional).....

6000.00

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3P)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 193 / 194

FOR LINE NUMBER:  
(check only one)☐ 11  
☒ 12NAME OF COMMITTEE (In Full)  
MIKE GRAVEL FOR PRESIDENT 2008**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
TELENOMICS GROUPNature of Debt (Purpose):  
DATABASE MANAGEMENT CONSU-  
LTING

Mailing Address 1515 N WARSON RD, ST LOISE, MO 63

City State ZIP Code  
ST LOUISE MO 63132

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD12.18202

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
THE HARTFORDNature of Debt (Purpose):  
INSURANCE CAMPAIGN OFFICE

Mailing Address P.O. BOX 2907

City State ZIP Code  
HARTFORD CT 06104

Outstanding Balance Beginning This Period

520.00

Transaction ID: SD12.9257

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

520.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

3520.00

2) **TOTALS** This Period (last page this line number only)..... ▶

64449.82

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

47615.73

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)..... ▶

112065.55

Image# 28930738530

Form/Schedule:SA17A FUNDS VIA ACTBLUE  
Transaction ID: SA17A.13527

\*\*\*\*\*